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The Effect of Prior Physical Abuse on the Expression of Overt and Fantasyaggressive Behavior in Children.

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THE EFFECT OF PRIOR PHYSICAL ABUSE ON THE EXPRESSION OF OVERT AND FANTASY AGGRESSIVE BEHAVIOR IN CHILDREN

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ABSTRACT

The purpose of this study was to investigate behavioral and personality characteristics, particularly those related to aggression, of children who had previously suffered severe physical abuse or punishment at the hands of their parents or parent surrogates, and who had subsequently been removed from parental custody and placed in foster homes. The humanistic and social concern for the effects of child abuse and the "battered child's" later effect upon society suggested the need for this research.

Twenty foster children with a mean age of 10.6 years and a substantiated history of physical abuse were compared with a matched number of foster children without such a history on the results of behavioral rating scales and the Thematic Apperception Test. The children's foster mothers, welfare caseworkers, and classroom teachers were used as raters and the T.A.T. was individually administered to each child. The abused children were further subdivided for data analysis on the basis of type of abuse incurred (specific incident versus prolonged severe punishment), age at the time of abuse (under and over three years), and duration since the abuse occurred (within or prior to the past five years). The T.A.T. was scored for n aggression, n affiliation, and punishment press using a frequency count, corrected for length of stories, of connotative words.

The results presented a profile of the abused child, as compared to the control group, of significantly less overt and fantasy aggressive behavior, as well as lower ratings on competitiveness, truancy,

quarrelsomeness, destructiveness, and verbosity. The abused child was significantly higher in the scaling of "somberness," "docility," desire to placate, appetite, masturbation, and thumbsucking. Foster mothers were also found to be more permissive of aggression by the previously abused child and to see them as less aggressive in the home. n Affiliation and punishment press were not found to differentiate the two groups on the T.A.T.

Fantasy aggression was expressed more frequently to the T.A.T. by children who were abused before the age of three years and by those with a history of prolonged severe punishment as opposed to specific incidents resulting in reported injury.

The major implications of the study were: (1) the apparent long term duration of the effects of child abuse in the similarity between the reported apathy of children immediately after the abuse occurred, and five years later, as was the mean duration of the present sample; (2) the incongruity between the lack of aggressive behavior in the abused children of this investigation and the results of previous studies showing a high incidence of early parental abuse in the history of adolescents and adults who later commit crimes of violence or acts of abuse upon their own children.

CHAPTER ONE

I. INTRODUCTION

Our society is concerned about aggression in all its forms - man against man or nation against nation - as never before. Three assasinations assaulted our collective conscience and, although briefly, inmobilized the world. With perhaps lesser impact, but with more foreboding significance, the crime rate of assault against persons has advanced steadily each year to the point where "crime in the streets" has become a major political and social issue. Aggression, it would seem, is certainly lowest in rank order of acceptable behavior - but often first in our response hierarchy. This is the cognitive dissonance which apparently marks our world at this time. The study of aggression, its cause and effects, control or modification, must necessarily then be an area of vital concern to the social sciences.

It is superfluous to say that aggressive behavior begins in infancy for every organism, whether instinctive or learned, a necessary instrumental act or expression of pure rage. Thus, the infant aggresses - but he is likewise aggressed upon. In lower animals the infant organism may be nurtured by the parent - but often nurtures extrafamily predators. In man the infant is generally safe from predators but because he requires an unusually prolonged dependency period there are inevitable conflicts between his and his parents' needs. The infant, and then the child, passively expects and then actively demands that his needs be met. When parents cannot, or will not, satisfy the child's need the confrontation between the physically hapless child and the physically mature

parent begins. In a very real sense not only does the infant's survival but his freedom of behavior depends upon the inclinations of the parent. The parent may at first tolerate the infant's primitively impulsive and aggressive behavior but then begins to gradually impose limits, and make demands which are enforced by, among other things, physical punishment and restraint. Physical punishment is aggression and although normally instrumental in the child's socialization when judiciously applied it can, of course, reach destructive levels between some parents and their children. It is this interrelationship, aggression and counteraggression in childhood, that this study hopes to investigate by going to an extreme condition of the relationship - the effect upon the child who is severely physically abused by its parents.

The investigator has had occasion to examine a number of abused, or "battered," children and has been struck by a common characteristic. These children were themselves usually devoid of aggressive behavior. Often socially responsive, and compliant, they have little real affect available. The apparent incidence of clear psychosis is surprisingly not high (although no reliable data is available on this) and they seldom present behavior problems. It was this clinical observation that led to the author's interest in this area of personality development.

The literature on aggression in children approaches the infinite. In this century, which saw the beginning of the systematic study of behavior, early studies were generally psychoanalytically oriented case descriptions dominated by the works of Freud. A social concern with the problems of juvenile delinquency in

Chicago led to the establishment in 1909 of Healy's "Juvenile Psychopathic Institute" - which began the first program research on the aggressive child in this country (Healy, 1915). This early interest in juvenile delinquency has, of course, now mushroomed into massive, largely government supported, research programs in the study of this world-wide social problem.

The study of aggression in children has, however, often suffered not only design problems but problems of definition. Aggression to some authors included a broad range of behavior which in other studies were regarded as "self assertiveness," "initiative," "negativism," or "instrumental acts necessary for the attainment of primary needs." In this study aggression will be defined as "the expression of either an overt (behavioral) or covert (fantasy) need to inflict injury on another individual or his object surrogate." This definition then subsumes aggressive acts and hostile wishes as sufficient to assume aggressive drive states in the child. Conversely, need for affiliation, which will also be considered in the experimental sample, is defined as either overt (behavioral) or covert (fantasy) needs to associate <u>non-aggressively</u> with other individuals or their object surrogates. These definitions, particularly that of aggression, are deliberately somewhat restricted. Broader and more positive aspects of aggression, as expressed by a number of authors, are recognized. Their view is that aggression is a fundamental characteristic of all living organisms and implies the concept of "reaching out," of action and vitality which is the affective force responsible for much of the individual's maturation and creativity. (Allen, 1950; Fontes, 1948; Ramer, 1948). This positive approach to aggression

will be considered in this study in terms of the activity level of the child (seen as healthy behavior) as opposed to aggressive behavior of the child which is seen as destructive and maladaptive.

II. The Motivation of Aggression

In exploring the antecedents, or perhaps independent variables, of the development and inhibition of aggression in children, it is logical to review the major lines of thought in the literature regarding the development of aggressive behavior.

As previously cited, many early systematic studies of aggression in children began in response to "delinquent" behavior problems which have existed since adults were first confronted by the perplexing display of self assertiveness exhibited by their maturing offspring. Prior to the Twentieth century, following Aristotelian concepts, the organism's behavior was largely considered a product of biological predispositions which states, simply, that he does what he does because of what he is (a "savage," "German," "Negro," "man," "wolf," or "spider," etc.) (Lewin, 1935). This was the zeitgeist during the early conceptualization, by Freud and his followers, of psychoanalytic theory and which gave rise to the instinct theory of aggression.

1. The Instinct Hypothesis

Instinct theories of aggression agree in viewing hostile tendencies as basically <u>unlearned</u> responses to some stimuli - but disagree regarding the origin of the aggression instigating stimulus. Instinct theories are divided into two positions on this point. The first is that of Freud and his disciples who "regard all hostile

actions as impelled by a constantly driving force whose energy must be released in one manner or another" (Freud, 1913). Freud believed that this energy stemmed from the "death instinct" or "Thanatos" - a fundamental tendency to return to the quiescence of inorganic matter supposedly inherent in all living organisms (vs. "Eros" - the life instinct). Impulses toward self destruction motivating the individual to kill himself will arise as he seeks the elimination of internal stimulation - but the self destruction is prevented by the turning outward of the aggressive impulses. Attacks upon others, either directly or in substitute form as attempts to control or master others, are said to provide an outlet for the energy of the death instinct (Berkowitz, 1962).

One reason for the psychoanalytic position, of aggression as a constant force, has been man's propensity to engage in frequent wars. Wright (1942) gives a comprehensive review of the causes and conduct of war as related to the instinct doctrine. One of the most telling interchanges on the subject occurred in 1932 between Freud and Albert Einstein. An agency of the League of Nations asked Professor Einstein to invite any person he chose to a frank exchange of views on an important problem of the time. The subject Einstein selected was, "Is there any way of delivering mankind from the menace of war?" In suspecting that the roots of conflict could be found in man's makeup, he wrote to Sigmund Freud. (Einstein, 1933). How is it, he asked, that propaganda devices succeed so well in rousing men to war? To Einstein, only one answer was possible. Man had within him, he felt, a "lust for hatred and destruction: which ordinarily was latent but could easily be aroused and raised to "the power of a collective

psychosis" (Einstein, 1933, p. 18). Freud agreed with him. Einstein's position was consistent with Freud's most recent interpretation of aggressive behavior. He believed in the existence of "an active instinct for hatred and destruction" in man, he replied, and went on to briefly outline his previously conceived conception of human instincts (Freud, 1913). Berkowitz's (1958) comment on this interchange seems appropriate. He noted that "training in the complexities of one science does not necessarily preclude giving oversimplified solutions to the problems of other disciplines."

Freud and his followers' concepts of aggression, however, had some very vital implications for human conduct and the control of human behavior. As conceived by Freud, an innate aggressive drive cannot be abolished by social reform or the alleviation of frustrations. Neither complete parental permissiveness nor the fulfillment of every desire would entirely eliminate interpersonal conflict. The lessons for social policy were obvious: civilization and moral order ultimately must be based upon force, not "love and charity." Freud was of this opinion in his reply to Einstein. Law for him was the might of the community. It was also violence "ready to be directed against any individual who resists it," and it supposedly worked the way any violence worked. Pessimistically, he believed there was no use trying to do away with men's aggressive inclinations but rather the most we could hope for was to divert these destructive impulses to such an extent that they need not find expression in war.

Freud's concept of aggression as a product of the basic "death instinct" has been modified or refuted by more empirically based theoreticians as well as latter-day psychoanalysts. First, the

tension-reduction model to account for purposive behavior, held not only by psychoanalysts but many experimental psychologists, began to be questioned by the results of a number of significant studies during the 1950's. These studies found that organisms, rather than seeking to reduce stimulation from the external environment, at times seemed to seek certain types of stimulation. (Harlow, 1953). Among the first such animal studies was that of Montgomery (1954) who found that his animals preferred the stimulation of exploring the longer and more complex arm, over a shorter direct route, in a modified dead end Y maze. Subsequently, several major studies found that animals will work to receive electrical stimulation of the brain (Olds and Milner, 1954; N. E. Miller, 1957). Similarly, Sheffield, Wulff and Becker (1951) found that copulation without ejaculation facilitated learning in naive male rats even though there was no tension reduction and in fact the animals were left in a state of heightened excitement. Many other studies of this type could be cited and all essentially suggest that organisms frequently go out of their way to obtain additional stimulation from their external environment. In summarizing this research, Hebb and Thompson (1954) generalized the results of the animal studies to human behavior and used as an example man's need to produce an optimal level of excitation by his liking for dangerous sports and the desire for challenging but often frustrating vocations.

The result of these studies, and their interpretation, has led to the present day concept that organisms do seem to desire an optimal level of stimulation, and perhaps occasional variations in this level as well, but that there is no evidence that they seek the complete

elimination of excitation.

As mentioned, psychoanalysts themselves have split in their interpretation of the aggressive drive since Freud's original studies. Some maintained that the impetus to aggression has arisen primarily from frustrations of one form or another (Durbin and Bowlby, 1939; Fenichel, 1945). Others prefer to keep the orthodox psychoanalytic theories of behavior, including the instinct motivation of aggression, but do not relate the aggressive instinct to the more basic drive toward death (Alexander, 1941; Hartmann, Kris, and Loewenstein, 1949). Fletcher (1957), in a psychoanalytically oriented review of instinct theory, summarizes that "of all Freud's speculations, his interpretation of aggressive behavior is the one most removed from facts."

The second group of exponents of an instinct theory of aggression included many of the dominant figures in psychology whose work coincided in time with that of Freud - or before the advent of behaviorism which began to replace the instinct doctrine in the 1920's. Such men as William James, Lloyd Morgan, William McDougall, (and even J. B. Watson prior to 1918) based their motivational theories on the presence of "instincts" which were defined by McDougall (1926) as "an inherited psychophysical process common to members of a given species." However, where psychoanalysts saw aggression as a constantly operating force continually seeking release, McDougall and others argued that the inherited disposition to hostility had to be activated by some instigating condition of frustration. Further, aggression was also somewhat different from other instincts in that there was held to be no specific class of objects whose perception constituted the first stage of the instinctive process. Rather, the

instigating condition was some frustration, i.e., interference with an activity impelled by any of the other instincts. The intensity of the aggressive behavior aroused by the frustration was said to be in proportion to strength of the obstructed impulse - an hypothesis concurred in by later proponents of the frustration theory of aggression (Dollard, Doob, Miller, Mowrer, Sears, 1939).

Ethological studies generally, but not entirely, tend to refute a pure instinct basis for aggressive behavior. Instinct theory would say that man possesses the aggressive instinct because of his biological heritage and membership in the animal kingdom. If this is true, then these same biologically determined reaction tendencies should also be present in lower animals. A majority of studies have not supported this conclusion. Scott and Fredericson (1951) reviewed a number of studies of causes of fighting in mice and rats. They established two main classes of instigations to aggressive behavior depending upon whether there was obvious competition between animals or not. Aggression instigated by competition clearly did not stem from a constantly operating instinctive drive to hostility. This was said to be either primarily instrumental aggression, in which aggressive acts are utilized as an attempt to achieve some goal, or a reaction to frustrations which largely represented obstructions to the attainment of this goal. While this explanation may hold true for rat behavior it is more difficult to explain in studies illustrating the "pecking orders" - or the establishment of a power hierarchy in the social behavior of a number of different species of birds, mammals, lizards, and fish (Collias, 1944, 1951; Scott, 1958). Where conflicts over food, mates, or nesting sites could easily be viewed

in the service of biologically necessary goals it is less apparent where fighting behavior is produced by competition for dominance. Collias (1944) and Carpenter (1960) speculated that this behavior does have instrumental significance in that it generally gives the dominant organisms greater freedom of movement than those subordinate to them - as well as an edge in the competition for rank frequently produced by hunger and food shortages and in the acquisition of a mate.

There have been a number of more recent studies, however, on the species specific behavior which give renewed vigor to genetically determined instinct behavior theorists. Most notable of these studies have been done by Lorenz (1966) who maintains that the mechanism of each instinctive pattern builds up an excitation in the particular instinctive center in the Central Nervous System dissipated by the performance of the action. If the pattern is not released by some appropriate situation, the "specific action potential" is dammed up. As a result, the threshold for stimuli capable of releasing the action pattern is lowered, or if the energy accumulation is great enough, the action pattern goes off by itself. This would explain, according to Lorenz, the presence of apparently instinctive patterns in animals even though there is no obvious adaptational purpose to the activity. However, there has been little evidence to support the presence of "spontaneous aggression not obviously instrumental in nature or stimulated by some obstruction: (Fletcher, 1957). Tinbergen (1953) reports that the great majority of fights seen in nature involve individuals, usually males, belonging to the same species. According to his observations, there is no evidence of a

general aggressive instinct in animals; actual fighting does not occur as often as people tend to believe, and in most cases the opponents displayed "threat ceremonies" rather than actually coming to blows.

In general summation of the instinct theory of aggression in man, there is little support for the pessimistic Freudian viewpoint that there is a continually active destructive force within man that must be released in one form or another. Empirical studies, primarily animal studies, certainly do point to species specific behavior, probably genetic in origin, but it has not been clearly established that aggressive behavior can be included nor has this type behavior been found in man. The weight of the evidence, then, can lead us to believe that a child is not born with the inevitable potential of seeking to inflict injury on his fellow man. Certainly the child has and will develop the capacity for aggression, both in emotional responsiveness and in physical capability, but development of overt aggressive behavior (as differentiated from assertiveness) can perhaps be modified by his environment rather than merely controlled.

2. The Frustration Hypothesis

Berkowitz (1962), in his review of the current state of the frustration aggression hypothesis, concludes that most authorities today regard aggression as originating ultimately in response to some frustration. Actually Freud had also maintained in his earlier works that aggression was the "primordial reaction" to the frustration occurring "whenever pleasure seeking or pain avoiding behavior was blocked" (cited in Dollard, et al., 1939, p. 21) and many of his

followers today prefer this view to his later formulation as described in the previous section (Saul, 1956). The milestone work in this area, however, was undoubtedly produced by the "Yale group" of the late 1930's - John Dollard, Neal Miller, Hobart Mowrer, and Robert Sears. Their book Frustration and Aggression (Dollard, et al., 1939) was perhaps the first systematic attempt to understand aggressive behavior in the light of the then relatively new concepts of behaviorism. In retrospect the work can be criticized, and has been, on a number of points - one being the rather poorly designed studies from which much of their empirical data was drawn. However, many of the basic concepts are still held because of their tested validity. For the Yale group aggression was defined as "any sequence of behavior, the goal response to which is the injury of the person toward whom it is directed" (p. 9). The behavior, they pointed out, need not be overt but may occur in thoughts and fantasies, symbolic or direct attacks on inanimate as well as animate objects, or for that matter may not seem to be aimed at any target at all (p. 10). Nevertheless, as mentioned, there is an implicit tendency to attack the frustrating agent. Assertiveness and accidental injury to others are deliberately excluded from the category of aggressive acts, and no assumptions are made of a general, free-flowing destructive energy impelling non-hostile responses of the type that Allport (1954) has called the "steamboiler theory of aggression." Frustration, in their concept, is "an interference with the occurrence of an instigated goal response at its proper time in the behavior sequence" (p. 7).

What these statements have come to mean is that frustrations can produce an instigation to aggression (or a state of anger) but will

not necessarily be revealed in overt behavior. The individual will inhibit his hostile reactions if he is anxious about the display of aggression and fears retaliation, or punishment, or arousal of guilt feelings.

The original frustration hypothesis has been found to be an oversimplification and has been corrected by a number of authors, including some of the original group (Miller, 1959; Sears, 1941). Frustration has been found to be a sufficient but not necessary condition for the arousal of aggression. Durbin and Bowlby (1939) from studies of child and ape behavior, argue that fights breat out because of (1) disputes over the possession of external objects and (2) resentment at the intrusion of a stranger into the group, as well as, (3) frustrations. Seward (1945) objected on much the same grounds, and on the basis of animal data, and added that aggression could be produced by dominance strivings. Scott and Fredericson (1951) confirmed in their study the finding that the sight of a strange animal could produce aggressive behavior.

Another modification of the original frustration hypothesis has been the consideration of "instrumental aggression" in which the behavior is primarily oriented toward attainment of some goal rather than doing injury. Berkowitz (1962, p. 31) uses mass atrocities committed during wars as an example of instrumental aggression in that the object was to win the war rather than commit individual injury. (This example is highly questionable to the author.) Bandura and Huston (1961), however, demonstrated that children can acquire hostile modes of behavior merely by observing the aggressive actions of adults. They believed aggressive acts are an imitation of the

adult's behavior who, in providing a model for children to imitate, had helped define appropriate or at least permissable modes of behavior for them. The adult may have told them, in essence, that these actions might help to obtain whatever satisfactions they wanted from the situation. Anna Freud (1937), however, explained this phenomena by saying that the child adopts the attributes of an aggressive, punishing agent, "transforming himself from the victim to the agent of aggression," in order to alleviate anxiety.

The presence of suitable aggression evoking cues as well as prior learning have been found to be major factors in predicting the probability of aggressive reactions to frustration. Cues are stimuli bearing some degree of association with the anger instigator but this association may be symbolic as well as physically similar. Weatherly (1963) demonstrated this effect using a group of college women whose mothers had been either high or low in permissiveness toward aggression. The groups were either deliberately angered by the experimenter or received a kindlier treatment from him. After this a second person, supposedly unconnected with the experimenter, administered two sets of thematic apperception test (TAT) cards, one containing strong cues for aggressive themes and the other low in "picture pull" for aggression. He stated that maternal permissiveness toward aggression probably leads primarily to relatively weak internal restraints against aggression rather than to a strong, constantly active "aggressive drive." Thus, it was not surprising that permissively reared students in the non-aroused condition gave no more aggressive responses to the TAT cards than did less permissively trained women in the non-angered conditions. It was

not until the women were provoked that a significant difference emerged. But here, too, relevant cues were necessary to activate the arousal predisposition created by the experimenter's insults. Students whose mothers had permitted aggression exhibited reliably more fantasy aggression than did the less angered permissively treated group only to the high cue (aggressive pull) cards. Their aroused hostile inclinations were not revealed, even though their inhibitions were fairly weak, unless aggressive cues were present. The importance of relevant cues was even more dramatically shown in a study by von Holst and von Saint Paul (1962). They found that stimulation of a certain region of the fowl brain led to organized patterns of aggressive behavior primarily when relevant cues ("an enemy") were present. An electrically stimulated rooster would attack a small stuffed "predator" - or the rooster's keeper - but would exhibit "only motor restlessness" when all substitutes for an enemy were lacking.

Rosenzweig (1944) differentiated among various classes of frustrations which he viewed primarily from a clinical viewpoint and, therefore, was most concerned with active internal obstacles to need satisfaction. Ego-defensive reactions, including hostility, presumably occur only in response to threats to the ego. He devised a three-fold division of such reactions (which also form the basis of the Rosenzweig Picture Frustration Test). When the individual is frustrated there may be (1) extrapunitive responses in which he "aggressively attributes the frustration to external persons or things," (2) intropunitive responses in which he "aggressively attributes the frustration to himself," or (3) impunitive responses which "avoid blame altogether." An individual could develop one of

the three as a characteristic response to frustration on the basis of complex prior learning experiences which would involve the individual's total self-concept in relation to his environment.

Because this present study will be primarily concerned with the effects of severe punishment on aggressive behavior, the theorem of classical frustration-aggression theory should be mentioned. This is, "the noxious stimulation is frustrating, producing anger as well as fear. However, as the intensity of the noxious stimulation increases, either directly or in a perceived liklihood of its occurrence, fear arises more rapidly in intensity than does anger" (Berkowitz, 1962, p. 44). In other words, anger is the dominant emotional state when the frustration is mild pain, but fear becomes dominant as the pain in increased. A number of studies have supported this, some of which will be described later. Berkowitz cites the Scott and Fredericson (1951) study where it was found that slight pain produces regressive responses in mice and rats while severe pain gives rise to escape and avoidance behavior. The concept that "the anticipation of pain or serious loss" can have the same effect was found by Janis (1951) who discovered that during the bombing attacks on England in World War II the people who had undergone "near misses," who had faced but narrowly escaped death, showed, not unexpectedly, the most acute and persistent fear symptoms. The more distant the person was from the point where the bombs fell the less intense the fear symptoms although they exhibited temporary anxiety.

Relative to the above, and pertinent to aggression in physically abused children, is a second concept, also quoted by Berkowitz (1962, p. 45); "The extent to which this emotion (fear) is stronger than

anger may be a function of the individual's perceived power to control or hurt his frustrator relative to the frustrator's power to control or harm him.: Thus, the child would be expected to be more afraid or fearful than angry when he believes he can receive serious harm from the parent - whom he feels helpless to attack in reprisal. This concept is, of course, common to many theories of child development, originating in early psychoanalytic theory.

This latter element of frustration aggression theory is certainly consistent with the author's clinical observation of children who have been severely physically punished by their parents. These children have, by and large, been excessively inhibited in all response areas - including aggression- and the author has come to think of them in his practice as "empty" children. It is this unfortunate characteristic which, as mentioned in the introduction, prompted this study. Additional and more specific parameters of the clinical condition will be discussed in the following section.

III. Aggression in Children

Lauretta Bender states that "the ordinary vicissitudes of life, including the ambivalence and inadequacies of two ordinary parents, can be well tolerated by children unless they have suffered from long periods of deprivation in personal parental relationships, especially in the early infantile periods, or unless they have suffered from disorganizing brain pathology" (Bender, 1953, p. 143). This statement, of the inherent adaptability of children, very succinctly describes the author's view of child development. It also points to the major variables in the child's drive toward normal

growth - the quality of the parental relationship and the organismic structure. This study is concerned with both of these variables to some degree but principally with one parameter of the child's development - aggression as affected by one aspect of the parent's relationship to the child - punishment. To be considered are the familial and individual antecedents of aggressive behavior in children, with particular emphasis on children from socially disadvantaged homes, and the effect of punishment practices on the child.

Assuming a child who is organismically intact, factors most often considered in studies of aggression are:

(1) Individual characteristics of the parents (aggressive vs. passive model and degree of permissiveness of child's aggression).

(2) Social, cultural, and pathological variables of the family.

(3) Effects of parental loss or separation in early childhood, and

(4) Normal maturational characteristics of age and sex.

Not included in these categories are the subjective, often covert, qualitative aspects of the parent-child relationship which operates across all categories and which is highly significant in psychodynamic theories of personality development. This variable can be inferred by the manifest behavior of the parent and the child but is specifically beyond the scope of this study.

The Bandura and Huston (1961) study of the child's imitation of aggressive acts in the same parent has already been cited. Nursery school children first interacted with either a nurturant or less nurturant adult and then were given an opportunity to watch this person (the adult model) work on a task. In one group the adult model displayed a good deal of verbal and physical aggression as well as

other forms of behavior and in the other group did not exhibit any aggression at all. The results indicated convincingly that children can acquire hostile forms of behavior merely by observing the aggressive actions of an adult. They found that aggression was readily imitated regardless of prior quality of the adult-child relationship. Several studies have shown that fathers can serve as aggressive models for their children even though the fathers themselves are not aggressive (Sears, Pintler, and Sears, 1946; Funkenstein, 1957). Aggressive behavior is felt to be associated with the masculine role in our society and the mere presence of a father figure in the home allows boys, particularly, to learn some aggressive behavior through identification. These studies show that the absence of the father in the home produced significantly lower levels of aggressive play in boys compared to boys where the father was in the home. A similar difference is not obtained between the father-present and father-absent girls. In a more recent series of studies by Sears, et al. (1957), it was found that punitive parents could set an aggressive example for their children. A field study by Levin and Sears (1956) also illustrated this process. They found that aggressive mothers produced relatively strong aggressive habits in girls who were strongly identified with their mothers. The severity of home punishment for aggression, they found, was a relatively insignificant determinant of doll play aggression for boys, however, which they attributed to the boys' generalized identification with the masculine role. In general, however, the majority of studies on aggressive modeling have shown that the aggressive father figure was imitated more frequently than the aggressive mother figure -

particularly where physical aggression was the dependent variable. The general consensus was that the adult female was less readily copied when she behaved aggressively because children regard her aggression as being inappropriate to her sex role and similarily, girls imitated physical aggression less often than boys because this activity was not consistent with their concept of their own sex role.

The most consistent finding of studies on aggression, as might be expected, was that there is a positive curvilinear relationship between permissiveness of aggression and the subsequent expression of aggression (Bach, 1945; Chasdi and Lawrence, 1958; Lesser, 1957; Levin and Turgeon, 1967; Mussen and Naylor, 1954; Stotland, 1959; Yarrow, 1948). Permissiveness for aggression is, of course, negatively correlated with punishment for aggression in parents (Sears, et al., 1957). Punishment, or the anticipation of punishment, is generally considered as the principal inhibitor of aggressiveness in children and the absence of punishment therefore acts as a reinforcer for aggression. However, while mild or moderate punishment may decrease aggressiveness the Sears study found that severe punishment increased aggressiveness (by increasing frustration anxiety and offering aggressive models). Clinical literature, also, has long recognized the effect of the inconsistent parent - who is alternately permissive and punishing - on the child's behavior. The general effect of this mixed condition, however, was to increase the anxiety level of the child who then may or may not respond with increased aggressiveness. Thus, in the Sears study, the combination of high permissiveness and high punishment practices by the parent produced the largest percentage of aggressive children. (41.7% for boys; 38.1% of the girls.)

There are some variations on the effect of permissiveness. Parents tend to be more permissive toward aggression in boys than in girls except within the sibling group (Sears, 1957). A number of studies have also attempted to show that within the highly punished child group (low permissiveness) there is an increased incidence of fantasy aggression in both play activities and in projective test responses (Hollenberg and Sperry, 1951; Sears, et al., 1953). Levin and Sears (1956), however, found this to be true for girls only. These studies, and others similar to them, concern the relationship between an overt and fantasy aggression as expressed in various test situations. This controversial subject will be more fully discussed in a later section.

Socio-economic levels of the family have been consistently found to be related to aggressive patterns in children. In their extensive study of the child rearing practice of 379 families, Sears, Maccoby, and Levin found that the lower class mothers were significantly more restrictive and punitive than the mothers of their middle class sample. Low class mothers were more severe in their punishment of aggression by the child directed toward the parents and were no more encouraging of aggression toward other children than were the middle class mothers (Sears, et al., 1957). The lower class mothers in the Sears study, however, were of the so-called "working class," or "class 4" families, where there is considerably more stability within the family than in the so-called "lower class," or "class 5" families, (Herzog, 1963). Chilman (1965) and Chandler, et al. (1968) described the very poor as being the most alienated and distrustful group in our society. In comparing child rearing patterns of this group,

with patterns associated with successful adaptation and middle class society, they list as the first characteristic, "inconsistent, harsh, physical punishment." They list further such characteristics as "authoritarian, rigid family structure...rates of marital conflict high and high rate of family breakdown, limited verbal communication; relative absence of subtlety or abstract concepts; a physical - action style" (Chandler, et al., 1968, p. 221). On the other hand, conflict with authority is high and although aggressiveness within the family is often handled with harsh punishment, this is presented in inconsistent fashion. Aggression outside the family - within their own social group - is encouraged. Until recently aggression toward those in higher socio-economic groups was discouraged, but this is rapidly changing as this group strives for upward social mobility.

Bennett (1960) in an in depth study of 50 delinquent and 50 neurotic children found only "trend" differences between the number of delinquent children coming from working class and middle class families. However, she states that "psychological observers who have worked with delinquents in a therapeutic or remedial capacity have almost unanimously attached fundamental importance to the role of consistency and continuity in the education and training of the child, both in matters of discipline and in the parents' personalities and their methods of dealing with the child's emotional and instinctive manifestations. Consistency over a long period should be a primary consideration, and trial and error approaches that switch without substantial reason from one method to another and conditions that involve frequent moves from one foster home or institution to another, should be avoided at all costs." She goes on to say that "the problem of delinquency is, at bottom, that of dealing with uncivilized aggression beyond the control of society and often beyond the individual's own control. Many alternative reformulations have been made about the role of aggression in instinctive, family, and social life. These studies remain inconclusive and serve more to open up new problems and to show the fundamental significance of the study of aggression for the understanding of delinquency - and indeed of normal life - than to solve urgent practical clinical problems

involving aggression" (p. 28).

Bennett's emphasis of consistency in child discipline would seem to suggest that poorer families, who are reportedly more inconsistent, would tend to produce more aggressive children than middle class families. This is, however, a gross generalization and anyone familiar with middle class family patterns is well aware of the prevalence of inconsistent handling of aggressiveness and other behavior although perhaps more subtly by these families.

Racial differences were not found by Megargee (1966) in a study comparing white and Negro juvenile delinquents on three projective tests. He carefully matched the two groups for socio-economic status and I.Q. before administering the T.A.T., Rosenzweig P.F. study, and the Holtzman Ink Blots. No significant differences were found on 69 Stein T.A.T. scores or seven P.F. scores. Some differences were found on three of the 22 H.I.T. scores. Megargee believed his results were consistent with other studies in the literature where two samples were matched on I.Q. and that studies which have not done so were making invalid inferences about basic racial personality structure.

Privation-deprivation concepts have occupied a major role in studies attempting to establish that deficiency conditions in early childhood are antecedents to problems in later behavior patterns of children. Privation involves the absence or inadequate supply of "essential stimuli" to the child from his environment for lengthy periods in early life. Deprivation involves the removal of important stimuli from the child's environment - as in separation from the parents. Behavior patterns found include limitations in

inhibitory tendencies and guilt reactions, as well as hyperactivity, unmanageability, and difficulty in concentration. In younger children, the patterns may include developmental and intellectual arrest, depression, and apathy; in older children, impaired social maturity with the extremes of either no requirement - or apparently insatiable requirements - for the formally deficient experiences ("attention," "affection," and "attachments"). Gerwirtz (1961) pointed to a common problem that occurred due to the conclusions drawn by foster parents and institutional caretakers about children who have had "deficient reinforcement histories" caused by neglect, malice, or incompetence of the original parents. He said that from what they take to be behavior limitations in the children, or from information supplied by some diagnostic procedure, the caretakers may conclude that the children are afflicted with some organismic anomaly (brain injury) or simply that they are "retarded." Bijou (1963) then pointed out that when the caretakers define their charges as "backward" this can feed on itself like a self-fulfilling prophecy as they may then continue to offer a restricted stimulus diet to these children - on the assumption that "backward" children cannot benefit from stimulation. Alternatively, under the rationale that such a deficient child "needs" more than the usual amount of attention because he is "handicapped," the caretakers may overly reinforce the child's dependent behavior while, at the same time, under their humane rationale, may systematically extinguish or punish independent and aggressive activities of the child - thus insuring that he will remain helpless and infantile. Thus, often because of the attitudes of their foster parents and caretakers more than because of their

presumed or actual afflictions, these deprived children develop in a stilted passive way in environments in which active responsive children, seen as healthy, could have developed fully (Gewirtz and Etzel, 1967).

After reaching a peak between the ages of three and five overt expressions of aggression (actions intended to injure some object) steadily decreased in frequency with increasing age. This has been a general result of a number of studies, principally those of Sears, et al. (1957), MacFarlane, et al. (1962), and Rosenzweig and Rosenzweig (1952). In infancy the child expressed a diffuse rage which with maturation and learning becomes focused into aggressive behavior. Such an increase in specificity of hostile actions is partly due to the direct influence of reinforcement - the child repeated those particular modes of aggressive behavior that have brought him the rewards he desires - and partly to development of internal controls. Restraints in the form of punishment shaped the form of the individual's hostility as well as its frequency and intensity. Specific motor and language aggressive responses began to replace primitive diffuse aggressive responses so that by the time the child reaches school age aggression is largely expressed through language in which symbolic injury is substituted for physical hurt. In the Rosenzweig and Rosenzweig study (1952), using the picture frustration technique they developed, direct aggression, defined in terms of extra-punitive responses, declined with age from the four year olds to the thirteen year olds while [illegible]e inhibited intropunitive responses increased in frequency. [illegible]ne MacFarlane study, a longitudinal study of several hundred children

covering development between the ages of twenty one months and fourteen years, found that the aggressive mode was maintained longer by boys than girls - which they attributed to higher energy levels and fewer social pressures for control. They also found, not unexpectedly, an increase in physical aggressiveness at puberty for both sexes. In their 1953 study, Sears, et al. explained the decline of aggressiveness with age as part of a generalized inhibition which is directly related to the severity of punishment experienced by the child.

As previously mentioned, boys tended to express more aggressive behavior than girls throughout childhood and, of course, into adulthood. In the Sears study (1953), previously quoted, the results showed that "a given degree of maternal punitiveness has a stronger effect on girls than on boys." This led to a greater generalized inhibition in the severely punished girls than in boys with comparable experience. It was believed that girls identified more strongly with the mother and thus tended to suffer more severe punishment for aggressive behavior. Similar results have been found in a number of studies using a variety of experimental designs. Lansky et al. (1961) found that boys were significantly higher than girls on self-ratings of aggressive tendencies. Gordon and Cohn (1961) found boys to be more aggressive in doll play activities than girls. Comparable results have repeatedly been found in animal studies. Hebb and Thompson (1954), in their investigation of the behavior of adult chimpanzees at the Yerkes Lab, demonstrated that males performed more acts of direct open aggression than did females.

Both learning and biological factors are believed to play a part in

producing sex differences in aggression. Beman (1947) and Beach (1942) found that aggressiveness in castrated male animals could be restored by administration of endrogen. Rather than directly stimulating aggressive behavior, however, it seemed likely that the male hormone acted to increase physiological excitability.

In summarizing antecedents of aggression in children, boys tended to be more aggressive than girls at all ages; direct aggressive behavior with intent to injure began to decline after reaching a peak between the ages of three and five; the frequency, intensity, and direction of aggression was largely dependent upon level of permissiveness (high vs. low punishment) of the parent; loss or separation from parents in early infancy tends to produce conditions of apathy and low aggression in children while loss or separation during latency or adolescence produces less response inhibition and tendency toward greater aggressive behavior; low socio-economic families tended to be more punitive toward aggression within the family but also to offer more aggressive models and conditions of frustration and deprivation as well as greater permissiveness for aggression outside the family than do middle class families; aggressive modeling occurs between parent and child with boys tending toward greater aggressive role playing behavior of the father and girls greater dependency and affiliation role playing behavior of the mother.

IV. The "Battered Child Syndrome"

There have always been, no doubt, children who have been physically abused by their parents. Charles Dickens very poignantly used this theme in some of his more successful novels. It was not until

this century, and the development of child psychology, that serious questions arose about the common practice of "whipping and flogging" of errant children. Spanking and "whipping" are, of course, still common practice for many parents and although not particularly condoned by the literature, it is considered to be a practical and effective learning experience for the child and a ventilation for parent - if done with judicial restraint. However, serious acts of aggression against the child that lead to physical injury obviously goes beyond limits of normal punishment practices. Studies previously mentioned, showing the relationship between severe punishment and aggressive behavior in the child, considered spanking and perhaps "slapping" as criteria for severe punishment. The general results (although not unanimous) showed that children who received severe punishment from parents exhibited more overt aggressive behavior. Studies of delinquency showed that use of severe physical punishment was a major antecedent to development of aggressive delinquent behavior in later years (Glueck and Glueck, 1950; Bennett, 1960). Sears, et al. (1957) found a positive correlation (.23) between mothers' reports of high aggression in their children and their use of physical punishment. However, they found that use of physical punishment for other kinds of unacceptable behavior - and not for aggression - had no effect on the amount of aggression the child showed. Sears explained their results according to modeling theory as well as to the increase of frustration anxiety - particularly in the very young child who is helpless before the physical power of the adult and must accept his control whenever it is displayed in physical form.

They also found, incidentally, that mothers who used severe physical punishment tended to be colder in their affectional interaction with their children (punish-affection r-.26) and that "coldness" was also associated with severe punishment for aggression (r-.22). However, again, the criteria for severe punishment stopped short of physical abuse in these studies.

The present level of social and medical concern for the abused child seems to have been precipitated by an article by C. Henry Kempe, in the Journal of American Medical Association entitled, "The Battered Child Syndrome" (Kempe, et al., 1962). Beyond coining the phrase this article also prompted a rash of medical, social work, and popular articles relating primarily to the social structure of the family, medical diagnosis of the child, and legal ramifications with appeals for more legislation to protect the child. The Children's Bureau of the Department of Health, Education and Welfare (1965) has published a bibliography listing 127 studies and reports on the battered child between 1946 and 1965 with the majority listed for the 1962-65 period.

Kempe became concerned over the incidents of physically abused children reported from metropolitan hospitals and polled 71 hospitals across the country for information about such children seen during a one year period. Three hundred and two cases were reported of which 33 had died of their injuries and 85 suffered permanent brain injury. He found that in only one-third of the cases was there any subsequent legal action against the parents. Kempe and his group then contacted 77 district attorneys across the country and received reports of 447 additional cases, of which 45 had

died and 29 had suffered permanent brain damage. In this group court action had been instigated in 46 per cent of cases. In the hospital cases clinical manifestations of abuse varied widely from "mild" and originally unsuspected to the most obvious and bizarre. Subdural hematoma was the most frequent injury followed closely by severe contusions and fractures of extremities. A majority of the children were less than three years of age and most showed evidence of long term neglect including malnutrition and "failure to thrive." Kempe and his group felt that the problem was primarily psychiatric in nature and noted that there had been, at that time, little research done in understanding the problem. They felt that physicians were reluctant to make a diagnosis of child abuse because of the possibility of legal involvement with the family and their own need to deny the existence of such brutality toward children by their parents.

Because of inconsistent, and reluctant, reporting of physically abused children by physicians and hospitals estimates of the number of clearly defined cases each year vary widely between 10,000 and 30,000. In a recent popular magazine, Rebecca Smith, Director of the Child Welfare League of America's Information Services, is quoted as estimating the more conservative figure of 10,000 children a year as "abused, battered, or killed." (Ross and Kupferberg, 1969). Another report in a recent news magazine, on the other hand, gives an upper estimate, or 30,000 such cases (Time, 1969). These figures, even in the upper range, reflect only those cases where the child received medical treatment for injury or where abuse lead to death that was clearly related to injuries inflicted by

parents. The true number of severely abused children, the majority of which do not reach the medical statistics, is, of course, unknown.

As previously mentioned, a great majority of studies on the abused child have come from social work and medical literature. A common problem in these studies has been the establishment of clear criteria of abusive parental behavior. Elmer (1966) studied a group of children with broken bones admitted to a Pittsburg hospital and found that in a number of instances the injuries were established as accidental rather than as parent inflicted as was first suspected. Brett (1966) in a study of social characteristics of parents of "abused" versus "non-abused" children believed that her study was also hampered by the absence of accepted definition of abusive or non-abusive behavior towards the children. She found no single social characteristic that distinguished the two groups but did find a constellation of characteristics that was more "frequently" found in the abused group. These were non-white race, income source outside the family, and failure to finish high school. However, she believed that differentiation was needed between behavior arising from ignorance of good child rearing practice and deliberate mistreatment of the child. Colter and Friedman (1968), using home visits and indepth interviews combined with medical evaluation, were apparently more successful in clearly identifying 19 cases that were hospitalized at the University of Rochester Medical Center during a two year period. The children ranged in age from one month to five and a half years with a median age of eleven months. There was a predominance of boys over girls (12 vs. 7). Two of the children died as a result of the abuse. Twelve of the nineteen children

had suffered fractures of extremities or skull and the remainder suffered either severe bruises, head injuries, and or burns. Family data showed that fourteen of the eighteen families (there were two children from one family) were complete family units and that all but one of these intact families were self-supporting. Three of the four incomplete families were comprised of mothers raising their children alone with financial support from the Aid to Dependent Children Program. Parents were not as chronologically young at the time of marriage, or at the time of abusive behavior, as might have been expected. (They were generally in their early twenties.) Their conclusions, from the admittedly scant data available on a limited sample, was that there were in these adults "a defect in character structure leading to a lack of inhibition in expressing aggression and other impulsive behavior." Although chronologically adults they were further described as "child parents" who were incapable of assuming adult responsibilities in forming mature relationships. They wished themselves to be dependent upon a perceived parent figure. This general "immaturity" in describing parents of abused children is a common element in many social studies. Being basically dependent persons themselves, they cannot tolerate dependency demands of their own children. The parents' frustration tolerance is low and they are prone to impulsive acts of aggression toward those weaker than themselves. Parents often describe their feelings prior to the abuse as one of intolerable irritation caused by the child's demand for attention that interferes with parents' activities. As the child's needs are not attended to, his demands (by crying usually) become more insistent

and the parents more angry until they impulsively strike out at the child in a fit of rage. If not done impulsively the aggression may be perpetrated in the form of "justifiable" punishment for the child's misbehavior. Often the form of deliberate punishment assumes bizarre forms of sadism. The author has seen several children who have been so victimized. In one instance a mother punished her six-year-old son for taking a bit of food from the refrigerator by searing his rectum with a redhot poker. Another mother punished her twelve-year-old daughter for masturbation by forcing the girl to hold the offending hand for several minutes in a pot of boiling water. Both of these mothers felt justified in their punishment practices and both had heretofore been considered as stable and model mothers in the community. An example of long term impulsive abuse was seen in a fifteen-year-old Negro girl who, in infancy, had been given to a group of migrant farm laborers by her mother who wished to get rid of the child. This girl had been raised in abject deprivation, with continuing physical and sexual abuse until the age of thirteen when her "adoptive father", in a drunken rage, split open her face with an ax and left her in a ditch by the side of a road where she was fortunately found several hours later by a passerby. When this girl was seen several years later by the author, besides bearing disfiguring facial scars she was apathetic and docile and overly obedient to her foster parents. Intellectual and affective functions were severely restricted and beyond the description of "the battered child," she could also be described as "the empty child."

V. The Measurement of Aggression

This study will primarily be concerned with the effect of severe punishment on the expression of overt and fantasy aggression and its counterpart, affiliation, in a group of culturally deprived children. Fantasy or covert aggression will be measured by the Thematic Apperception Test (T.A.T.) and overt aggressive modes of behavior through the use of previously standardized rating scales utilizing the child's foster parent, teacher, and caseworker as raters. Therefore, a review of the current status and applicability to the present study of these types of measurement will be reviewed.

1. A Measurement of Fantasy Aggression: the T.A.T.

As Lindzey (1961) states, the most general assumption underlying projective testing is, "if an individual is presented with a stimulus situation permitting variable responses, the particular response he emits will reflect his characteristic response patterns and tendencies to response." However, the relation between overt behavior and the fantasy illicited by projective tests is a problem that still confronts psychology and which has prompted many critical reappraisals of our traditional techniques. This was perhaps particularly true of our work with children because, as Coleman (1967) pointed out there has been less published research, and therefore fewer data to be obtained in this area, and, secondly, because it cannot be assumed aprior that results obtained with adults will hold when applied to children.

Most of the work that has been done on the relation between fantasy projection and overt behavior in children has concerned itself with aggression, yet even in this sphere many studies have

reported contradictory results.

Mussen and Naylor (1954), Kagan (1956), Lesser (1957), Weissman (1964), and James and Mosher (1967) have reported direct relationships between aggressive fantasy and behavior. The Mussen and Naylor results are of particular significance to the present study because they related expression of aggressive fantasy, overt aggressive behavior (from ratings and behavior reports) and fear of punishment (punishment press) in a group of 29 boys from lower class families. A significant positive relationship was found between fantasy aggression needs on the T.A.T. and overt aggressive behavior, with highest correlations occuring in those subjects where aggressive fantasy was relatively high and fear of punishment was low. They pointed out that studies using children of middle class families were possibly non significant because of the conditioned response inhibition (of aggressive fantasy) imparted in middle class culture - but much less so in lower class families. Lesser (1957) found a clear relationship between maternal encouragement of aggression and its expression in fantasy and overt behavior in a group of ten to thirteen year old subjects (+.43 where encouraged and -.41 where it had not been encouraged). Two additional variables, need for power and need for affiliation were found to affect the association between overt and fantasy aggression by Otis and McCaulles (1955). As expected, children with high need for power were high on aggression in a play frustration situation while children with high affiliation needs were low on aggression and high on submission scores.

Little or no relationship between T.A.T. fantasy aggression and overt behavior has also been reported by a number of authors,

including Murray (1943, 1951) - the author of the T.A.T.

Sanford (1943), Symonds (1949), Jensen (1957), and McNeil (1962) all found minimal relationships using such criteria of overt aggression as teachers' ratings, case history material, and behavioral adjustment scores from personality inventories. Gluck (1955) found a negative correlation when testing effects of an authoritarian examiner on the response content. He concluded that anxiety in the test situation is a major determinant inhibiting aggressive fantasy and also raised the question of the basic relationship between fantasy and behavior..."It may well be that fantasy and behavior are quite different aspects of a functioning personality." Feshbach (1951), Sanford (1943) and Symonds (1949) have suggested that the inverse correlation between fantasy and behavior is due to drive reducing properties of the fantasy itself - that is, if a need can be expressed in fantasy it need not seek behavioral gratification. Gluck tended to refute this, finding no relationship between what he determined as "covert fantasy" and behavior. The question, however, as is often the case in understanding complex behavior and variables, has not been resolved.

Many earlier T.A.T. studies overlooked what now seems to be an obviously significant variable in eliciting aggressive fantasy. This is the stimulus properties of the cards themselves. Unlike the Rorschach the T.A.T. cards are, of course, relatively structured stimuli of identifiable human figures engaged in various activities. Kagan (1956) was among the first to recognize this variable in relating aggressive themes to behavior. He presented a set of specially devised pictures, previously scaled on the basis of aggressive

structure, to a sample of 118 boys aged six to ten who had been classified from most to least by teacher ratings on overt aggressive behavior. Results showed a direct and positive relationship between overt and fantasy aggression only to pictures rated as highly aggressive in content and, further, that overt and fantasy behaviors were similar in mode of expression and goal object. Anxiety reactions to covert aggressive needs was believed to be the inhibiting factor for the low fantasy and low overt aggressive groups - although the source of the anxiety was not specified. Buss (1961), in his review of T.A.T. research on aggression, agreed with Kagan that "unambiguous pictures are the best stimuli for yielding indicants of behavioral aggression."

Murstein (1961, 63, 65), however, was the first to rigorously scale the stimulus properties of T.A.T. cards according to "aggressive pull." In summarizing a number of his, and others, studies he concluded, however, that "cards with low or medium stimulus pull for hostility tend to differentiate persons high and low on overt aggression more readily than highly hostile cards." (1963, p. 319). His "hostility pull" ratings reliably differentiated the following cards into three categories: (1) high hostility pull; cards 13 MF, 18BM, 3GF; (2) medium - 7GF, 6GF, 9GF; (3) low - 10, 13B, 13G.

Subsequent studies, however, while generally substantiating Murstein's stimulus property scaling of the pictures, have found that the "high pull" cards rather than the low or medium pull cards were clearly superior in predicting overt aggressive behavior from the fantasy projections to the T.A.T. - which essentially agreed with Kagan's original finding. (Coleman, 1967; James and Mosher, 1967).

Coleman again equated response inhibition to anxiety for those children who are unable to project fantasy aggression and who also exhibit little behavioral aggression. Children who have been allowed to express aggression, without fear of punishment, it is implied, are both freer to project and to exhibit aggressive needs - but adequate stimulation is required.

Characteristics of T.A.T. responses of children in foster homes was explored by North and Keiffer (1966). They compared the thematic productions of twelve foster children, with a matched (by age, sex and school achievement test scores) group of controls in terms of affiliation and aggressive need themes of "death and departure," "sad and crying," and "angry and fighting." Results were highly significant for greater affiliative needs of the foster child group but short of significance - although in the expected direction - for the aggressive need categories. This study was the only one found using the T.A.T. technique on a sample comparable to the subjects of the present investigation.

In reviewing the use of the T.A.T. as an indicator of fantasy aggression the author was impressed by the number of varied scoring techniques that were used. In contrast to McClelland's (1953) extensive standardization of scoring for n achievement, and Shipley and Veroff's (1958) for n affiliation, it would seem that each author devised his own technique for scoring n-aggression. These fell generally into one of two categories: (1) Judges ratings of the aggressive behavior projected to the central figure ("hero") of the thema's or (2) general frequency of the use of aggressively connotated words in the stories. This variability of quantification, together

with sample and stimulus differences already discussed, could well account for much of the inconsistency of results between studies. However, the T.A.T. remains, perhaps inexplicably, as the richest source of fantasy content regarding specific needs (as opposed to the process fantasy of the Rorschach) available to the experimenter and clinician today. For that reason it was chosen as one of the measurement techniques for this study.

2. The Measurement of Overt Aggression: Rating Scales

The flexibility and apparent ease of quantification have long made rating scales one of the more popular tools of assessment. They are, of course, particularly valuable where we wish to quantify a subject's overt behavior either from direct observation or post hoc from the reports of others who have had previous opportunities to observe the subject and form opinions about him.

Among the earliest attempts to scale children's aggressive behavior (and many other traits as well) were the Fels Child Behavior Rating Scales (Richards and Simons, 1941) and the California Behavior Inventory for Nursery School Children (Conrad, 1932; Read, 1940). The Fels scales, on which extensive longitudinal data has been collected, include four scales in the area of aggression: the frequency of aggression; degree of success of the child's aggression; the reaction of aggression to others; and, lastly, the extent to which the child tends to elicit aggression directed toward him. Each scale has a general definition as well as five defined cue points, and the rater makes his judgment at any point on a graphic continuum.

Sears (1953) and Kagan (1956) illustrated the effective use of teachers in scaling aggressive behavior of their students. In the Sears study teachers' ratings and observation measures of the child's behavior correlated .64 for boys and .48 for girls. Kagan obtained similar results in ratings of fighting behavior among boys.

Two of the most extensive scales have been developed by Sears et al. (1957) and MacFarlane (1962). Sears evaluated child rearing techniques, including childrens' aggressiveness, and parental permissiveness and punishment for aggression, in a sample of 379 families. A five point scaling technique was used, with each point clearly defined. MacFarlane reported a longitudinal study of 116 children from twenty-one months to fourteen years of age. Items dealt with a wide range of children's behavior, using parents as raters, and also utilized a well defined five point scaling technique. Both studies were done with primarily middle and upper lower class families, with MacFarlane's being perhaps the most representative sample of the population. MacFarlane warned of the unreliability of mothers ratings of behavior on incidents occurring prior to the immediate present. Wenar (1961) also cast a critical eye on mothers' reports although he reviewed a number of studies where significant correlations were obtained between parents' ratings and observed fact.

Children's ratings of parents have also been evaluated and shown to have generally positive correlation with the observed case. Kagan (1956) obtained perceptions of which parent was more "friendly," "punitive," and "dominant." He found that both sexes perceived their mothers as friendlier and their fathers as more punitive and dominant

but that older children were more likely than younger to view the same sex parent as more punitive and dominant. Gray (1959) used Osgood's format to present children with a series of paired adjectives representing either end of a seven point scale (e.g., from "tired" to "full of pep").

In the present study sections of both MacFarlane (1962) and Sears (1957) scales will be utilized. In addition, a simple rating scale of parental punitiveness and dominance will be devised to present to the subjects to assess their perception of parental behavior.

VI. Statement of the Problem

The major purpose of the present study is to evaluate the lasting effects of prior severe physical punishment (abuse) in response inhibition of aggressive fantasy and overt behavior of children. In addition, affiliative needs and punishment press characteristics will be evaluated and related to aggressive behavior. Further analysis will include effects of the present parental practices on the expression of the three major variables. Finally, variables of duration since abuse occurred, age at time of abuse, and type of abuse experienced (specific incident vs. chronic severe punishment) will be related to expression of overt and fantasy aggression.

Behavioral characteristics of parents and children will be determined through the use of rating scales, and fantasy material with the T.A.T. Experimental and control populations will both include children now in foster care placement, but differentiated on the basis of a history of prior physical abuse versus a negative history of physical abuse.

The following hypotheses will be tested:

1. Children who have previously suffered severe physical abuse will show significantly less aggressive and affiliative needs in both overt and fantasy behavior than a matched non-abused group.
2. The previously abused group will show more fantasy punishment needs than the non-abused group.
3. That foster parents will show significantly greater tendency to punish, and see the child as aggressive, in the non-abused group than the abused group.
4. That the period of the child's life in which abuse occurred will be significant, with severe punishment occurring before age three showing more lasting effects of response inhibition than abuse occurring during later years.
5. That elapsed time since the period of abuse will not be a significant variable in determining aggressive response inhibition.

CHAPTER TWO

METHOD

a. Subjects

Subjects for this investigation were forty children now in foster home placement through the Division of Foster Care Service of the Department of Public Welfare in the greater Baton Rouge area. A total population sample of 150 foster children was prescreened for intellectual level, age, race, sex, handicapping physical disability, and indication of severe abuse. From this group an experimental and a control sample of twenty children each were drawn. Criteria for selection to both groups were (1) age at last birthday between seven and fifteen years. (2) Intellectual level, as determined by either the Wechsler Intelligence Scale or the Stanford Binet, above 60 I.Q. points. (3) The absence of disabling physical handicaps (blindness or deafness). Criteria for selection to the experimental group (A) included substantiated medical or other reliable evidence of severe physical abuse at the hands of their parents or guardians at any time from early infancy to the present. Necessary criteria for physical abuse included one or more of the following: (1) fractured bones, (2) severe contusion, (3) parental inflicted burns or cuts, (4) reliable reports of severe beatings which may or may not have caused noticeable tissue damage, and (5) prolonged physical restraint (tied to articles of furniture or confined in a small space as an act of punishment).

Criteria for selection to the control non-abused (NA) group was the absence of above forms of punishment in the child's history,

as clearly as could be determined by the caseworker and child's report.

Final selection to A and NA groups was determined, by drawing with replacement, 20 subjects who met criteria for placement in A or NA categories from each of the two larger groups of the original total sample of 150 children. Forty-six children were excluded because of age, I.Q. scores, severe physical handicaps, or through having moved from the area or returned to their natural parents. Of the one-hundred and four remaining, twenty-seven had a documented (medical or otherwise) history of abuse and seventy-seven did not. Twenty children from each of these groups therefore comprised the final study sample. Some major demographic characteristics of the children in each group are given in Table 1. The close similarities are both surprising and welcome, and would also seem to represent a deliberately matched sample when in fact it does not — with the exception that both groups were known to be in foster care. Table 1 also indicates, for the previously abused group, mean age at which abuse occurred (4.1 years) and mean duration since abuse (5.7 years, with a range between 1 and 15 years).

Table 2 further describes the experimental (A) group as a function of type of abuse the child is known to have experienced. (Specific incident resulting in injury vs. persistent experiences of severe punishment). Type of physical abuse that an adult might inflict on a child are obviously varied but it might possibly be significant to differentiate the blatant injury producing punishment from the more chronic use of severe punishment which, however, fell short of the type of traumatic tissue damage that is usually associated

TABLE 1

Characteristics of Previously Abused (Experimental) and Non Abused (Control) Groups of Foster Children

Characteristic	Abused (A)	Non Abused (NA)
1. Number	20	20
2. Age - Mean	10.6 Years	11.0 Years
- Median	10.0 "	11.0 "
- Range	7-15 "	8-14 "
3. Race and Sex		
- Negro Male	6	11
- Negro Female	6	3
- White Male	4	2
- White Female	4	4
4. I.Q. (Wechsler Scales)		
- Mean	81.3	79.0
- Median	79.5	82.0
- Range	67-104	62-105
5. Years in Foster Care		
- Mean	6.6 Years	7.1 Years
- Median	5.7 "	7.5 "
- Range	3-15 "	3-12 "
6. Age Came into Foster Care		
- Mean	4.0 Years	4.1 Years
- Median	3.7 "	3.0 "
- Range	.2-9.0 "	.2-9.0 "
7. Last Age at Which Abuse Occurred		
- Mean	4.1 Years	—
- Median	5.5 "	—
- Range	.2-9.0 "	—
8. Years Since Abuse Occurred		
- Mean	5.7 Years	—
- Median	5.0 "	—
- Range	1.0-15.0"	—

TABLE 2

Characteristics of the Abused Group by Type of Abuse
(Specific Incident vs. Persistent Experiences)

Characteristic	Specific Incidents (Resulting in Injury)*	Persistent Experiences (of Severe Punishment)
1. Number	10	10
2. Sex		
Male	4	6
Female	6	4
3. Age at Abuse (Last Occurrence)		
Mean	6.2 Years	3.7 Years
Median	6.0 "	3.0 "
Range	.7-11.0 "	.2-7.0 "
4. Years since Abuse (Last Occurrence)		
Mean	4.2 Years	7.1 Years
Median	3.5 "	5.5 "
Range	.5-9.0 "	3.0-15.0 "
5. Substantiating Medical Evidence		
Yes	9	4
No	1	6
6. Abused by:		
Both Natural Parents	0	3
Mother only	1	6
Father only	2	1
Foster Parents	5	0
Other	2	0

*Fractures, burns, floggings, rape

with clearly diagnosed cases of "the battered child." Because of the difficulty in getting accurate information on abused children, particularly after they had been removed from the custody of the abusing adult, it is not possible to say that this table represents a true dichotomy of experiences - that the child with a specific history of broken bones at the hands of his parents did not also suffer prior continual severe punishment that did not become public knowledge, or that the child who was persistently beaten with a belt or board had not at one time also suffered a fracture or severe cuts and abrasions from the same source. This table, then, only represents what is available in the child's record and not necessarily in his life.

Some historical differences between the two categories of abused children are indicated in Table 1. Most notably is the older mean age at the time of abuse for the injured children (6.2 years vs. 3.7 years), also the more recent occurrence of the abuse for the specific incident group (4.2 vs. 7.1 years), the expected preponderance of medical evidence for the specifically injured children (nine out of ten vs. four out of ten for the persistent punishment group), and, finally, the differences in the relationship to the child of the abusing adult. Five, or half, of the children receiving medically diagnosed injuries at the hands of their guardians were abused by their foster parents after being removed from the custody of their natural parents. All of these children were, of course, subsequently replaced to other foster homes, and appropriate measures taken to protect other children from these adults. Rather than pointing to an inadequacy in selection of foster parents this most probably

indicates the suspected true incidence of child abuse in our society that was, in this instance, reliably reported because of the welfare caseworker's close contact with the children in question. These five cases of abuse at the hands of foster parents represented, as far as the author knows, the total of such instances among several hundred foster children in this particular area. For this study, moreover, the fact that the abuse occurred in these five cases after removal from the natural parents was not felt to be significant because the study relates to the effect of physical aggression on the child and not to the parent-child relationship per se.

To conclude the description of the subjects of this study, the major common characteristics of the experimental and control groups were that they are children who have been removed from the custody of their natural parents and placed with surrogate or foster parents. Differentiating the two groups was the experience of severe physical punishment, as defined.

b. Measurement Instruments

1. From Murray's standard Thematic Apperception Test series the following nine cards were presented in the order listed: 13B, 7GF, 18BM, 10, 9GF, 3GF, 13G, 6GF, 13MF.

n Aggression, n affiliation, and punishment press were scored according to the Mussen and Naylor (1954) system. Scores are frequency counts of (1) aggressive acts of the hero of the story which implicitly or implied has as its goal response injury to an organism or organism surrogate. Examples: fighting, killing, getting angry, breaking, ridiculing, etc. Frequency of

aggression score (FA) was determined by a summation of frequency scores for each card divided by number of page lines of the transcription to correct for variability of length of each subject's productions. (2) Similarly, n affiliation was determined by a frequency count of acts of the hero which explicitly or implied has as its goal response positive association or dependency on another organism or organism surrogate. Frequency of affiliation score (FAf) was determined by summation and corrected for length by division of the total score by number of lines of the transcript. (3) Punishment press (FPp) was determined by a frequency count of acts or aggression or restraint directed toward the hero in the story situation, and scored by summation with correction for length.

2. From the Sears, et al. (1957) scales the following items were utilized. Each has five explicity defined points from least (1) to most (5). (See Appendix A.)

a) Amount of aggression exhibited by child in the home, excluding that toward siblings.

b) Permissiveness for aggression toward parents.

c) Permissiveness for aggression among siblings.

d) Permissiveness for aggression toward other children.

e) Level of demands for child to be aggressive toward other children.

f) Severity of punishment for aggression toward parents.

g) Severity of punishment for aggression toward siblings.

h) Severity of punishment for aggression toward others outside the home.

3. From the MacFarlane, et al. (1962) scales the following categories of behavior scales were utilized. Each has five explicitly defined points from least (1) to most (5). (See Appendix B.)

a) Problems associated with biological functioning and control (6 items).

b) Problems associated with motor manifestations (6 items).

c) Problems associated with social standards (7 items).

d) Problems associated with personality patterns (16 items).

4. Child's rating scale. A five point scale was devised for this study for subject's rating of his parents. Each point is defined from least (1) to most (5). This scale also includes three non scaled items relating to source of punishment, nurturance, and the child's expressed wish to return to his original family. (See Appendix C.)

c. Procedure

There were six measurement situations, including three separate ratings with the MacFarlane scale of subjects' overt behavior, examiner's rating, using the Sears scales, of the foster parents' characteristic response to the child's behavior, the subjects' response to the selected T.A.T. cards, and subjects' rating of foster parents' behavior toward him.

1. Each child's welfare caseworker completed the MacFarlane scales of child behavior.

2. The examiner verbally administered to foster parents (to correct for low literacy rate) the MacFarlane scales of child behavior, and

3. the Sears scales of parental attitudes.

4. The subject's current classroom teacher rated the child's manifest behavior, in the school situation, using MacFarlane scales. Teachers were contacted initially by mail with telephone follow ups necessary for a few to complete the sample.

5. Nine selected T.A.T. cards were administered to each subject, using standard procedure of individual administration with complete written response transcriptions.

6. Subjects were then verbally administered the child's rating scale of parental behavior.

d. Analysis

Tests of the six major hypotheses were determined by:

1. t Test analysis of difference between mean scores of the abused (a) and non abused (NA) subject groups on the parameters:

   a) frequency of fantasy aggression on the T.A.T. (fA).

   b) n affiliation (fAf) on the T.A.T.

   c) punishment press (fP) on the T.A.T.

2. Point biserial correlation technique and the F test of significance was utilized to investigate the relationship between:

   a) rating scale scores by the three classes of judges between the two groups;

   b) age, race, sex, duration since abuse, and age of abuse variables vs. overt and fantasy behavior scores;

   c) child's and parent's rating scales of aggression and permissiveness to aggression.

3. The Pearson product moment correlation technique was used to determine rater reliability between the three classes of judges (foster mother, social caseworker, and teacher).

CHAPTER THREE

RESULTS

Results of the study were clearly positive in showing a difference between the two groups with respect to the major variable of aggressiveness, both overt and in fantasy projection. The previously abused child exhibited less aggressive behavior, in the eyes of his foster mother, caseworker, and teacher, and expressed fewer aggressively connoted responses to the Thematic Apperception Test (T.A.T.), than did the non abused foster child. In addition, the single most heavily weighted characteristic that differentiated the two groups of children was found to be "somberness vs. gaiety," with abused children showing the predicted response inhibition and depressed affect. Punishment and affiliative needs, as measured by the T.A.T., were, however, not found to be significantly different between the two groups. Age at the time of abuse (under three years and over three years), and the type of abuse experienced (specific incident vs. persistent severe punishment) were differentiated in the abused group on the expression of fantasy aggression to the T.A.T. but not on the scaling of "somberness" nor on parents' rating of overt aggression in the home. Time elapsed since the abuse occurred (over and under five years) was not significant with respect to the above three variables. It was further found that previously abused children expressed significantly less interest in returning to their natural parents, where parents had been the source of abuse, than did the non abused control group.

The data is presented in Tables 3 through 15. Table 3 indicates the Pearson product moment correlations between the three classes of

TABLE 3

Interrater Product Moment Correlations on
MacFarlane Scales of Behavior and Adjustment
For Each Group of Children

	Rater Correlations*		
	T-C	T-P	C-P
Previously Abused Group (A)	.72	.73	.91
Non Abused Group (NA)	.80	.75	.84

Key: T = School Teacher
C = Welfare Caseworker
P = Foster Mother

*All correlations sig. at the .01 level or better (t test analysis).

judges (foster mothers, teachers, and caseworkers) in rating the two groups of children on the 35 item five point behavior and adjustment scale developed by MacFarlane (1962). (See Appendix B.) All correlation figures were found to be significant at the .01 level, or better, on t test analysis and the reliability and concordance of raters is therefore felt to be acceptable in this measurement situation. It is interesting to note that while each class of rater showed significant reliability of ratings with the other two classes in each situation, the foster mothers and caseworkers tended to be in closer agreement with each other than with the teachers. Teachers were handicapped, however, on a number of the items in the scale which pertained more to the child's characteristic home behavior than to behavior normally observable in the school. ("Nocturnal enuresis" being the clearest example.) For these items teachers were instructed to indicate their lack of knowledge about the particular behavior, and the item was subsequently scored on the basis of the mean rating given by foster mothers and caseworkers.

Table 4 is included as a summary of significant results from the three rating scales and the T.A.T. scores. This data has been drawn from succeeding tables 5 through 12 and indicates those characteristics or behaviors found to significantly differentiate the two groups of children. Items under categories A, B, C, and D represent mean rating scale scores by the three classes of raters (foster mother, teacher, caseworker) on the MacFarlane scales. Item E, (Aggression Exhibited in the Home) is the foster mother's rating on the Sears (1957) scale (Item A, Appendix A). Item F represents the child's perception of his parents' permissiveness to his own aggression, from

TABLE 4

Summary of Significant Differences Between Abused and Non Abused Groups of Children (N=40)

Characteristic	Greatest Frequency of Occurrence: Abused	Greatest Frequency of Occurrence: Non Abused	Level of Sig. F - or - (t)
A. Biological Functioning and Control			
1. Appetite (good)	A		.10
2. Masturbation	A		.10
B. Motor Manifestations			
1. Thumbsucking	A		.05
2. Stuttering	A		.05
C. Social Standards			
1. Truancy from Home		NA	.01
2. Destructiveness (Objects)		NA	.05
3. Selfishness		NA	.10
4. Quarrelsomeness vs. —		NA	.05
5. Desire to Placate	A		.05
D. Personality Characteristics			
1. Callousness (vs. sensitivity)	A		.01
2. Somberness vs. —	A		.001
3. Gaiety, cheerfulness		NA	.001
4. Negativism vs. —		NA	.05
5. Docility	A		.05
6. Temper Tantrums - Severity		NA	.10
7. Competitiveness		NA	.10
E. Aggression Exhibited in the Home (Foster parent report)		NA	.01
F. Greater Permissiveness of Foster Parent to Child's Aggression (Child's perception)	A		.05
G. Fantasy Aggression to the T.A.T.		NA	.01 (t)
H. Verbosity (Length of stories) on the T.A.T.		NA	.05 (t)

the child's scale developed for this study (Appendix C). Items G and H point to differences in projection of aggressive fantasy as well as verbosity (length of stories) on the T.A.T.

As seen in Table 4 the abused child shows more inhibition not only of aggressive behavior but of activity level and affect as well. Items A and B also suggests more self stimulation within the abused group, as indicated by the greater frequency of higher appetite, masturbation, and thumbsucking, compared to the non abused sample of children.

Tables 5 through 8 report the complete data from the MacFarlane rating scales for each group of children (Appendix B). The mean of the ratings given by the teacher, caseworker, and foster parent for the non abused and abused groups are given in the first two columns, followed by point biserial correlation between the two groups of scale scores. The value of F (for 1 and 38 degrees of freedom) in the analysis of variance test of significance and the resulting probability of chance occurrence occupy the last two columns. Probabilities of .10 or better are reported with the abbreviation "n.s." indicating an unacceptably higher level of chance occurrence of the data. Point biserial correlation technique was utilized because of the dichotomous characteristic of the two subject groups (abused vs. non abused) which made use of the Pearson product moment as well as biserial correlation techniques inappropriate. According to Guilford (1956) with equal numbers in each group ($p = .50$) point biserial will underestimate biserial and Pearson correlation figures, computed from the same data, by approximately twenty per cent. In assessing, therefore, degree of relationship between the two groups on each parameter it should be

kept in mind that correlation figures reported tend to somewhat underestimate what might be considered the "true" relationship between the two sets of measurements as defined by more common correlational techniques.

Biological functioning and control characteristics for the two groups of children, as rated by the three classes of raters, are given in Table 5. Of the six items only the two previously mentioned, appetite and masturbatory activity, were found to differentiate the groups at the .10 level of significance. The abused groups also tended toward greater modesty (avoiding being seen undressed) as well as more "sex interest," but not at an acceptable level of confidence. Both groups showed little difficulty with enuresis, either day or night, and both r_{pb} and F were zero.

Motor manifestations exhibited by the two groups are given in Table 6. Thumbsucking and stuttering were found with significantly greater frequency among abused children than among the non abused control group. General activity level of both groups was rated essentially the same and at the midpoint of the five point scale (see Appendix B, page 4, for description of the items). This was an unexpected result considering the generally inhibited behavior of the abused children in other areas of functioning. Convulsive and motor habits, or "tics," were, like enuresis, almost non existent in the total group of children. The abused group did tend toward more speech articulation problems but not so clearly or at the level of confidence as was the item regarding stuttering.

Social standards, with the data reported in Table 7, shows the non abused control group with a greater frequency of truancy from

home (but not from school), destructiveness, selfishness, and quarrelsomeness. All four would have been predicted under the hypotheses of reduced aggressive and self assertive behavior for the abused child. In these items destructiveness refers to objects, generally toys or other personal possessions as well as household furnishings. Selfishness is measured as the opposite of willingness to share goods or possessions, and quarrelsomeness is contrasted with a "desire to placate others" at the opposite end of the scale.

Lying and stealing were reported with slightly greater frequency for the previously abused children but neither reached the required level of significance on an analysis of variance.

Personality characteristics measured included sixteen parameters which are reported in Table 8. Of these, five were found to be significantly different between groups and all five indicated reduced levels of aggressiveness and affective expression among abused children. The abused child was rated as being more "callous" (versus sensitiveness) and "somber" than his non abused counterpart while the latter were significantly more negativistic, competitive, and had more severe "temper tantrums" than the abused child. The quality of somberness (versus gaiety) was found to be the most clearly differentiating variable of the entire study with a significance at the .001 level and a point biserial correlation of -.94. Callousness, defined in the scale as "markedly insensitive, indifferent, unconcerned or thick-skinned, impervious to criticism from others...indifferent to the feelings of others...," is no doubt related to somberness in that both connote a general apathy in interpersonal relations, as does a lack of competitiveness as well.

TABLE 5

Biological Functioning and Control Characteristics of Previously Abused (A) and Non-Abused (NA) Children

	Item	Mean Scale Score NA	A	r_{pb}	F	Level of Sig. (p)
A.	Daytime Enuresis	1.13	1.13	.00	.00	n.s.
B.	Nocturnal Enuresis	1.62	1.51	+.13	.63	n.s.
C.	Appetite (good to poor)	2.72	2.25*	+.30	3.40	.10
D.	Excessive Modesty (vs. Exhibitionism)	2.92	3.17	+.20	1.65	n.s.
E.	Masturbation	1.25	1.52	+.31	3.89	.10
F.	Sex Interest	1.76	2.08	+.19	1.47	n.s.

TABLE 6

Motor Manifestations of the Previously Abused (A) and Non-Abused (NA) Children's Groups

	Item	Mean Scale Score NA	A	r_{pb}	F	Level of Sig. (p)
A.	Convulsive and Motor Habits	1.13	1.13	.00	.00	n.s.
B.	Nailbiting	1.86	1.99	+.12	.59	n.s.
C.	Thumbsucking	1.03	1.32	+.34	5.00	.05
D.	Activity	3.14	3.13	.00	.00	n.s.
E.	Speech - Articulation	1.93	2.27	+.22	1.93	n.s.
F.	Speech - Stuttering	1.30	1.65	+.35	5.61	.05

*Indicates higher scaled incidence of the trait.

TABLE 7

Social Standards of the Previously Abused (A) and Non-Abused (NA) Children's Groups

Item	Mean Scale Score NA	Mean Scale Score A	r_{pb}	F	Level of Sig. (p)
A. Lying	2.47	2.64	+.12	.553	n.s.
B. Truancy from Home	1.63	1.30	+.48	11.78	.01
C. Truancy from School	1.34	1.30	+.10	.47	n.s.
D. Stealing	1.89	2.16	+.14	.754	n.s.
E. Destructiveness	3.03	2.84	+.37	6.23	.05
F. Selfishness	3.22	2.97	+.28	3.32	.10
G. Quarrelsomeness	3.21	2.61	+.34	5.09	.05

TABLE 8

Personality Characteristics of the Previously Abused (A) and Non-Abused (NA) Children's Groups

	Item	Mean Scale Score NA	A	r_{pb}	F	Level of Sig. (p)
A.	Excessive Emotional Dependence	2.77	3.09	+.17	1.08	n.s.
B.	Excessive Demanding of Attention	2.73	2.84	+.06	.158	n.s.
C.	Extreme Sensitiveness (vs. Callousness)	3.24	2.87	-.60	10.71	.01
D.	Extreme Timidity (vs. Bravado)	2.70	3.01	+.16	1.03	n.s.
E.	Pronounced Shyness (vs. Friendliness)	2.75	3.11	+.24	2.18	n.s.
F.	Specific Fears	1.60	1.72	+.11	.478	n.s.
G.	Extreme Swings of Mood (vs. Unusually Stable)	3.19	2.86	+.21	1.76	n.s.
H.	Somberness (vs. Gay)	2.92	3.31	-.94	17.77	.001
I.	Negativistic (vs. Suggestible)	2.91	2.47	+.11	5.18	.05
J.	Irritable (vs. Placid)	3.09	2.78	+.25	2.40	n.s.
K.	Temper Tantrums: Severity	2.36	1.92	+.28	3.19	.10
L.	Temper Tantrums: Frequency	1.65	1.52	+.09	.350	n.s.
M.	Jealousy	2.82	2.58	+.18	1.25	n.s.
N.	Competitiveness	2.77	2.46	+.29	3.45	.10
O.	Reserve (vs. Spontaneity)	3.60	3.48	-.22	1.88	n.s.
P.	Unself-Reliance	3.08	3.07	.00	.00	n.s.

Emotional dependence, shyness, timidity, and "placidness" (versus irritability) were all more frequent within the abused group but did not reach acceptable significance levels. Unaccountably, the non abused group were rated as slightly more reserved (versus spontaneity) but, as above, this result was not statistically significant.

Table 9 gives results of the Sears (1957) scale items which were administered to the foster mothers (the complete scale is included as Appendix A). These five point scale items reflect the foster mother's rating of the amount aggression exhibited by the child in the home as well as the parent's characteristic level of permissiveness (or non permissiveness) and severity of any subsequent punishment for aggressive behavior. Of the eight items only the first, amount of aggression exhibited by the child, significantly differentiated the two groups. This was also the only item rating the child's behavior - with the remaining seven relating to the parent's response to the child's aggression. Previously abused children, as a group, were rated as being markedly less aggressive than non abused children by their foster mothers. Mothers also tended to be more permissive in allowing aggression by the abused group, and more demanding of aggressive behavior in appropriate situations, but not at an acceptable level of significance.

The child's perception of the parent's permissiveness to his aggression toward the parents and others was evaluated through a rating scale verbally administered to each child (see Appendix C). Results are given in Table 10 and show that abused children now see their

TABLE 9

Rating Scale Scores of Foster Mother's Perception of and Characteristic Response to the Child's Aggression

Item	Mean*	r_{pb}	F
A. Amount of Aggression Exhibited by Child in the Home			
Previously Abused	1.65	+.41	7.92**
Non Abused	2.40		
B. Permissiveness for Aggression Toward Parents			
Previously Abused	2.90	+.17	1.11
Non Abused	2.71		
C. Permissiveness for Aggression Among Siblings			
Previously Abused	2.85	+.08	.24
Non Abused	2.70		
D. Permissiveness for Aggression Toward Other Children			
Previously Abused	2.65	+.18	1.22
Non Abused	2.40		
E. Level of Parents' Demands for Child to be Aggressive Toward Other Children			
Previously Abused	2.50	+.24	2.48
Non Abused	2.10		
F. Severity of Punishment for Aggression Toward Parents			
Previously Abused	2.30	+.18	1.28
Non Abused	2.60		
G. Severity of Punishment for Aggression Toward Siblings			
Previously Abused	2.65	+.03	.04
Non Abused	2.60		
H. Severity of Punishment for Aggression Toward Others Outside the Home			
Previously Abused	2.80	+.10	.384
Non Abused	2.70		

*1 = None or not at all; 5 = high, or "a great deal," etc.
**Significant at .01 level

TABLE 10

Child's Rating Scale Scores of Foster Parent's Characteristic Response to Child's Aggression

Item	Mean*	r_{pi}	F
A. Child's Rating of Permissiveness of Each Foster Parent to Child's Aggression Toward Parents			
1. Mother's Permissiveness			
Previously Abused	3.05	+.34	5.09**
Non Abused	2.55		
2. Father's Permissiveness			
Previously Abused	2.80	+.17	1.08
Non Abused	2.50		
B. Permissiveness of Parents to Child's Aggression Toward Siblings			
Previously Abused	2.75	+.09	.31
Non Abused	2.80		
C. Permissiveness of Parents to Child's Aggression Toward Others Outside the Family			
Previously Abused	2.65	+.12	.571
Non Abused	2.85		

*1 = Not at all permissive; 5 = completely permissive.
**Significant at .05 level

foster mother (but not their foster father) as being more permissive to their aggressive behavior toward the parents than did the non abused control group. Thus the foster mothers, as seen from Table 9, perceived the previously abused children as less aggressive than their non abused counterparts - while the abused children, in turn, see foster mothers as more permissive toward their aggressive behavior. Permissiveness for aggression toward siblings, and toward others outside the home, was rated about equally by both groups of children.

Table 11 completes the data from the child's rating scale with frequency scores indicating the child's perception of the source of present punishment and nurturance (foster father or foster mother) as well as the child's expressed desire to return to his or her natural parents. Abused children tend to deny punishment ("spanking") by either parent and significantly less often by their foster mothers than did the non abused group. As expected, both groups overwhelmingly would choose their foster mothers to take care of them if they were hurt or ill, with only one person specifically selecting his father for this role (this child actually was choosing his natural father whom he visited regularly and wished to live with permanently).

Eleven of the forty children expressed a desire to return to the custody of one or both of their natural parents. Four of the previously abused children so indicated (three to their mother and one to his father) but, of these four, three had been abused by previous foster parents after being removed from the natural parents' home for other reasons. Thus, only one child expressed a desire to return to people who had inflicted severe physical abuse on him, while a total of

TABLE 11

Child's Perception of Punitiveness and Nurturance Between Foster Parents, and Preference Between Foster Parents and Natural Parents

	Previously Abused (Frequency)	Non Abused (Frequency)
A. Who spanks (or punishes) you the most?		
Father	1	0
Mother	4	11*
Neither	9	4
Both the Same	6	5
B. If you got hurt, who would you want to take care of you?		
Father	1	0
Mother	15	17
Either	4	3
Other	0	0
C. Would you like to go back to live with your real mother and father (or either if separated)?		
Yes, Both	0	1
Yes, Mother	3	6
Yes, Father	1	0
No, Neither	16	13

*Significant at .05 level (chi square)

ten children wished to "go home" where "home" had not been associated with severe punishment.

Results of the responses of each group to the Thematic Apperception Test (T.A.T.) with respect to the projection of aggressive, affiliative, and punishment fantasy is summarized in Table 12. Verbosity, defined in this instance as the mean number of total transcript lines recording stories for each group, was also found to significantly differentiate the two groups and is included in this table.

nAggression was measured in terms of frequency of aggressively connotative words (as previously defined) in the stories. Table 12 indicates mean number of such words used by each group in all stories after correction for length of stories by dividing by the number of lines in the protocols. Thus, in scoring an individual record the number of aggressive words (hitting, shooting, expressions of anger, etc.) in each of the nine stories was divided by the number of lines in that story and the totals were then summated to represent that particular subject's total nAggression score for all stories. The mean of these scores for the twenty children in each group is recorded in Table 12. An identical procedure was used to determine nAffiliation and punishment press scores by tabulating appropriately connotative words. A t test analysis of differences between the means was then computed as a test of significance, using 1 and 38 degrees of freedom.

Projection of nAggression was significantly less among the abused group of children, while nAffiliation and punishment press was approximately equal between the groups. With a frequency of .554 aggressively connotative expressions for the abused children, versus 1.542

TABLE 12

Mean n Aggression, n Affiliation, Punishment Press,* and Verbosity Scores on the Thematic Apperception Test By the Two Groups of Children

	Previously Abused	Non Abused	t
n Aggression	.554	1.542	2.310**
n Affiliation	1.924	2.346	1.222
Punishment Press	1.341	1.383	.602
Verbosity (Mean Total Lines, All Stories)	15.9	21.3	1.660***

*Scores represent mean frequency of connotative words used in all nine T.A.T. stories divided by number of transcript lines to correct for variability of total word count.
**Significant at .01 level (1 and 38 df)
***Significant at .05 level (1 and 38 df)

TABLE 13

Selected Characteristics of the Previously Abused Group As a Function of Type of Abuse Experienced

	Type of Abuse	
	Specific Incidents (Resulting in Injury) N = 10	Persistent Experiences (of Severe Punishment) N = 10
Somberness (Mean Scale Score)	3.24	3.37
Parents' Rating of Aggression in the Home (Mean)	1.50	1.80
n Aggression on the T.A.T. (Mean)	.277	.832*

*Significant at the .05 level (t)

for the non abused group, the means were found to be significantly different at a .01 level of confidence. The abused group also tended to show less affiliative needs (mean score of 1.924 vs. 2.346) but the difference did not reach an acceptable level of confidence. Punishment press was found with almost equal frequency between the two groups (1.341 for the abused, 1.383 for the non abused).

It was noticed during the administration of the T.A.T. that the previously abused children were less verbal than the non abused control group. Because this seemed to be related to the general response inhibition predicted for the abused child the dimension of verbosity was added to the data and quantified as the mean total number of transcript lines produced in response to the cards. This was found to be 21.3 for the non abused group and 15.9 for the previously abused. t Test analysis showed this difference to be significant at the .05 level of confidence with 1 and 38 degrees of freedom.

"Aggression pull" of the cards, as scaled by Murstein (1961), was not clearly operable, with one exception, in varying the number of aggressively connotative words to the cards. The medium pull cards (6GF, 7GF, 9GF) tended, in both groups, to have higher nAggression scores but this was statistically significant only between the low and medium pull scaled cards within the abused group (mean .079 to the "low" versus a mean of .298 on the "medium" cards). The cards rated as "high" in aggressive pull (3GF, 13M, 18BM) did not, in this study, produce the predicted result although the differences were also not, as indicated, significant.

Tables 13-15 describe several selected characteristics of the

abused group as a function of type of abuse experienced (specific incidents versus persistent severe punishment), age at time of abuse (under and over three years of age), and number of years since the abuse occurred (over and under five years). The characteristics chosen were those which had been found to clearly differentiate the total abused group from the non abused control sample and which were also most closely related to the major hypotheses of the study. These were the rating scale scores of "somberness" from the MacFarlane scales, foster mother's rating of aggression in the home on the Sears scales, and expression of nAggression on the T.A.T.

Children who had suffered persistent experiences of severe punishment but without a corroborated physical injury at a specific time, projected more fantasy aggression to the T.A.T. than did children with a history of specific traumatic injury. This data is referred to in Table 13 and differences in mean aggression scores between groups was found to be significant at the .05 level of confidence on t test analysis (t equaled to 1.81 with 1 and 18 degrees of freedom). Characteristics of "somberness" and overt aggression in the home, as rated on the two behavior scales, were not significantly different between the sub groups of abused children.

Fantasy aggression on the T.A.T. was also expressed at a somewhat significantly higher level when abuse occurred before the age of three than at an older age. Table 14 indicates that the difference between the mean nAggression scores for the two sub groups were significant at the .10 level of confidence on t test analysis. "Somberness" and the foster mother's rating of aggression in the home, however, were not affected by this factor.

TABLE 14

Selected Characteristics of the Previously Abused Group
As a Function of the Age at Which Abuse Occurred

	Age at Occurrence	
	Under 3 Years N = 10	Over 3 Years N = 10
Somberness (Mean Scale Score)	3.27	3.34
Parent's Rating of Aggression in the Home (Mean)	1.5	1.8
n Aggression on the T.A.T. (Mean)	.732	.377*

*Significant at the .10 level (t)

TABLE 15

Selected Characteristics of the Previously Abused Group
As a Function of the Number of Years Since Abuse Occurred

	Years Since Abuse	
	Over 5 Years N = 10	Under 5 Years N = 10
Somberness (Mean Scale Score)	3.50	3.11
Parent's Rating of Aggression in the Home (Mean)	1.5	1.8
n Aggression on the T.A.T. (Mean)	.599	.510

No significant differences.

Number of years since the abuse occurred did not seem to be a significant variable in affecting the three key characteristics. Table 15 indicates the mean rating scale scores for "somberness," aggression in the home, and T.A.T. aggression scores for children abused within the past five years and for those where abuse occurred prior to that time. There were no significant differences on t test analysis. The five year criteria was chosen because it represented the median time since abuse occurred for the total group.

CHAPTER FOUR

DISCUSSION

The major purpose of this study was to investigate behavioral and personality characteristics, particularly those related to aggression, of children who had previously suffered severe physical abuse or punishment at the hands of their parents, or parent surrogates, and who have subsequently been removed from parental custody and placed in foster care. It is, therefore, a study of "the battered child" from one to fifteen years (mean 5.7 years) after abuse occurred.

The results clearly supported the principal hypotheses that prior physical abuse would result in a decrease or inhibition in children of both overt and fantasy aggressive behavior and needs when compared to a control group with similar deprivation and separation experiences but without a history of physical abuse. Evidence of this effect was found with statistical significance in all six aggression related items from the two behavioral rating scales used (MacFarlane, 1962; Sears, 1957) and from the aggression scores on the Thematic Apperception Test. Behavioral characteristics related to aggression which described the abused children, as differentiated from the non abused group, were: (1) less destructive of objects; (2) less quarrelsome - greater desire to placate; (3) docility; (4) less severe temper tantrums; (5) less competitiveness; (6) less direct aggression exhibited in the home; (7) lower frequency of projected fantasy aggression to the T.A.T. cards.

In addition to reduction of aggressive behavior and fantasy there were other characteristics perhaps related to a generalized response inhibition that differentiated previously abused children

from the non abused control group. They were less "adventuresome" in terms of fewer truancies from home, less selfish in terms of giving up possessions to others, less "cheerful" and, conversely, described as significantly more "somber" as a characteristic affective state. They were also less verbal in responding to a semi-structured projective test (the T.A.T.) and more prone to disturbances in language communication (stuttering). In contrast to the inhibition of responsiveness to others, and to external stimuli, they were higher in two areas of self stimulation of primary needs - oral gratification (appetite and thumb-sucking) and sexual activity (masturbation). These latter two characteristics might suggest fixation or regression, depending upon age of occurrence, of personality growth as another dimension and area of study of the abused child.

There were, indeed, several items on the MacFarlane behavioral rating scale which were <u>not</u> found to differentiate the two groups and which might have been predicted to do so under the hypotheses of a generalized response inhibition of the "battered" child. Physical activity levels were rated as essentially equal by the three classes of raters, as was the item related to "unself-reliance." Abused children also only tended to be regarded as more "timid" and "shy" than the non abused but the differences did not reach statistical significance.

These, and other, perhaps incongruous similarities between the two groups would have to be considered in light of the nature of the control as well as the experimental group. Both groups of children have experienced some degree of deprivation and all have experienced separation from their natural parents. The effects of deprivation and separation from maternal care upon most children is well known in the

literature (see Bowlby, 1951, for a review) and these effects were operating within both groups of children in this study. The differences that were found, therefore, are felt to be either peculiar to the abused child or exaggerated manifestations of deprivation and separation as a result of severe abuse. That both groups of children may also share some common characteristics that would distinguish them from a randomly selected sample of the total population of children is to be expected on the basis of the criteria for selection to the present study. A valid comparison of results of the behavior rating scales with those of the more representative "normal" populations used in the MacFarlane (1962) and Sears (1957) studies was not found to be feasible because of the method of reporting data in the latter two reports (percentages of a much larger sample falling at each of the five scaled points). By inspection (only) of both sets of data, however, the children of this study were not grossly deviant in any of the item categories. There was, as expected, in all groups of raters a "middle" tendency bias so that in most non-deviant behavior categories (where there was a "low" tendency bias - for example, "masturbation") the modal frequency was generally the midpoint of the scale. This is attributed to, first, the nomothetic communalities of all children, regardless of biological and psychological backgrounds, and, secondly, to the propensity of people responsible for a child to rate his behavior as "normal" until the child crosses a hypothetical threshold and becomes clearly identified by the rater as "abnormal" in certain or all characteristics - in which case a reverse or "high" tendency bias may begin to operate. Hopefully this last type of bias, in its extreme at least, is counterbalanced by the number of children, and their raters, in each sample.

There was apparently a direct relationship between overt and fantasy aggressive behavior in the children evaluated. The abused group was significantly lower in both measurement situations than their non abused counterparts. This would agree with the findings of those supporting a positive relationship between these two dynamic characteristics (Mussen and Naylor, 1954; Kagan, 1956; Lesser, 1957, Weissman, 1964, James and Mosher, 1967) and would tend to refute the concept that a need not expressed directly will be expressed in fantasy (Symonds, et al., 1949). This was at least not the case with the abused child and was an unpredicted result of the study. Reduction of overt aggressive behavior in previously abused children had been clinically observed by the author but the hypotheses could have been made that these children would have ample justifiaction for extreme hostility which would be expressed in responding to a projective technique. Response inhibition, apparently, extends beyond the level of content fantasy stimulated by the T.A.T. Whether it might function at a so-called "deeper" level of process fantasy reportedly tapped by tests like the Rorschach is not known and should be the subject for future research.

An interesting finding was that abused children, although less aggressive, reported greater permissiveness for their aggression by their present foster mothers (there was no difference between groups with respect to perception of the father's permissiveness). On this question previous studies, notably Lesser (1957) and Sears (1957), had generally found a direct relationship between parent's permissiveness and subsequent expression of aggression. The present finding may well be, however, a reflection of the child's perception, modified by his need to see others as well as himself as non aggressive, rather than a

true statement of parental behavior. The foster mothers themselves reported no significant difference in their own estimate of their permissiveness for aggression between the two groups.

Hypotheses predicting less affiliative and greater fantasy punishment needs among the previously abused children were rejected by data obtained from the T.A.T. protocols. n Affiliation was expressed less often by abused children (the obtained t would be significant at the .15 level) but in this instance this is considered only as indicative rather than as substantive evidence of the reduction of this affective parameter of functioning in these children. Overt affiliative behavior was, further, not found to be different between the groups on the ratings of "dependency" and "attention seeking" by the foster parents, caseworkers, and teachers. The mean score for punishment press was actually slightly lower among the abused group but far from reaching significance.

These hypotheses had been predicated on the assumption that inhibition of affective responses was the result of the expectation of punishment for such responses. In clinical observation of abused children it had been noted that not only aggressive behavior and fantasy but most if not all interactional behavior between the child and others, particularly adults, was blunted or reduced. Failure of the type of data obtained in this study to reach an acceptable statistical level regarding n affiliation does not, of course, necessarily alter subjective observations regarding the children in question. Affiliation behavior, or the lack of it, is observable in a child while the expectation of punishment, or punishment press, is not so clearly identifiable

except in extreme instances. In this case it was inferred, and quantified, from the child's fantasy projection and was found with equal frequency among both abused and non abused groups. If this is a valid statement we might speculate on several variables producing this result. First might be the similarities between the two groups - both comprised of foster children from generally lower socioeconomic backgrounds where direct punishment (but not necessarily severe abusive punishment) is a characteristic practice of child rearing behavior. Thus both groups might be equally "expectant" of punishment and equally project this experience in fantasy. Secondly, time since the occurrence of severe abuse (mean 5.7 years) could have acted as a desensitizing factor in this particular expectation of the child. Abused children, in fact, were found to perceive their foster parents as more permissive (and conversely less punitive) to their aggressive behavior and therefore perhaps less expectant of punishment, at a verbalized conscious level at least, than were the non abused.

A reduced level of verbalization to the T.A.T. by abused children was not previously anticipated but, in retrospect, would seem to be consistent with the typically lower response and activity levels found in other areas of functioning. Perhaps related to this was a higher incidence of stuttering among the abused group which, in some psychoanalytic theories at least, is further associated with a "blocking" of aggressive expression. Delayed and disturbed language development has long been recognized as a result of early childhood deprivation (Skeels, 1938; Goldfarb, 1945; Pringle, 1960) but it seems to be intensified where deprivation and maternal separation is also

accompanied by severe punishment in the child's history.

Maternal permissiveness of their aggressive behavior reported by the abused children was more specifically expressed in comparing the source of punishment (generally "spanking") within the foster family. Non abused children generally saw the foster mother as meting out punishment - while the abused children tended more to deny punishment by either parent and significantly less so by the foster mother. This could, of course, be a valid observation on the abused children's part in the light of their own reduced aggressive behavior. Being less aggressive, and less "adventuresome," foster parents would naturally find fewer occasions for punishment. It might also reflect, as previously mentioned, the abused child's denial of aggressive behavior not only in themselves but in others as well.

From the child's questionnaire it was found that only one child who had been previously abused by his natural parents expressed a desire to return to his parents - while seven of the non abused so indicated as did three of the five children who had been abused by foster parents after coming into foster care. The desire of many foster children to return to their parents, however disturbed the home situation may have been, is not an uncommon observation among those working with foster children and is attributed by Bowlby (1951) to the child's early identification with one or both parents and to his distrust of later parental substitutes. That this need seems to be less frequent among abused children would suggest a more permanent severing of the parent-child relationship where the child is severely, and perhaps brutally, punished. Whether this is a simple cause-effect phenomena, however, is doubtful considering the blunting of affective functioning

in the abused children in this study. They would be less concerned about a change in their present home situation and less able or willing to express such a need if it were indeed felt. Another complicating variable would be the quality of the parent-child relationship apart from the incidents of abuse. As several studies have shown (Holter and Friedman, 1968; Melnick, 1969) parents of abused children are generally disturbed individuals who can neither empathize, support, or relate to their children. The child's identification with such a parent might be tenuous at best - and therefore easily transferred to surrogate or foster parents after separation.

It was found that the twenty children in the abused group could be subdivided into two groups of ten children each on the basis of the type of abuse experienced (specific incident leading to tissue damage versus persistent experiences of severe punishment leading to removal from the home), age at which abuse occurred (under and over three years), and duration since abuse occurred (under and over five years). These sub groups within the sample of abused children were compared on the basis of the most relevant and significant differences that were previously found to distinguish the total abused group from the non abused control sample - "somberness," "overt aggression in the home," and "fantasy aggression on the T.A.T." Results showed that children who had experienced persistent severe punishment, and those who had suffered abuse before the age of three, projected more fantasy n aggression to the T.A.T. Affect dimension of somberness, and the foster mother's rating of aggression in the home, was not significantly different between groups. Duration since the abuse occurred <u>did not</u> seem to act

as a significant independent variable - support being lent, therefore, to acceptance of the fifth hypotheses of the study that this would not be a critical factor in inhibition of aggressiveness among abused children.

Availability of more fantasy aggression to children whose known abuse experiences had been severe and prolonged rather than focused in one "traumatic" incident would seem to reflect agreement with the aggression studies of Sears (1957) and others where a positive relationship between severe punishment practices by the parent and aggressive behavior in the child was found. For the children in this study punishment was quite likely much more severe, and prolonged, than among the normal population used in the Sears studies so the effect of modeling (after the aggressive parent) would have suffered perhaps more response inhibition as severity reached some unknown threshold of tolerance within the child. Overtly aggressive behavior disappeared but the capacity for anger, and aggressive fantasy, was present to some degree and was expressed, although slightly, in the T.A.T. stories. (Frequency of expression was approximately half that projected by the non abused control group.)

The marked reduction of aggressive fantasy by children who had experienced at least one severe and injuring punishment episode points to the permanent effects of critical incidents in the child's development. This sub group perhaps best represents the popular definition of "the battered child" and results of this study would suggest, at least, that the capacity for feeling or expressing aggression is lowest among these children. They most closely resemble the children described by Spitz and Wolf (1946) who had failed to thrive and were behaviorally apathetic as a result of early deprivation and separation from a nurturing mother (and were diagnosed as cases of "anaclitic depression").

Distinctions between the above sub groups of children are, as mentioned, only suggestive and not by any means clearly defined. Other than the relatively small sample size the punishment or abuse experiences is only generally known because of the time elapsed and the unavailability of the adults involved. Overlapping between sub groups would be expected - children listed under "persistent experiences" but without specific incidents may have indeed had specific incidents of traumatic injury that was not reported or available in the case record. Considerably more detailed and accurate information regarding type and severity of punishment would therefore have to be known before specific relationships between punishment and its effects, within the group of abused children, could possibly be evaluated.

Greater fantasy aggression to the T.A.T. among children abused before three years of age is an unexpected result and tends to reject hypotheses number four which predicted greater response inhibition as an effect of earlier severe punishment. Both Bowlby (1951) and Spitz (1946), among others, felt that deprivation occurring before age three would have a more permanent and severe effect in reducing affective functioning. Their studies, however, dealt only with deprivation and separation from the parent rather than with the question of severe punishment in the parent-child relationship. The present result, in an admittedly small sample, might be attributable to several factors. First, the type of abuse experienced, as already noted, might introduce a significant variable. Second, the children abused before age three are now generally younger than those of the other sub group and as a number of authors have found (Sears, 1957; MacFarlane, 1962; Rosenzweig, 1952) aggressive responses normally reach a peak between ages of three

and five. Third, time, as a "healing agent," although not found significant in this study, is nevertheless a complex and possibly significant factor.

The status of the original five hypotheses are as follows:

1. "Children who have previously suffered severe physical abuse will now show significantly less aggressive and affiliative needs in both overt and fantasy behavior than a matched non abused group." Accepted in part. Aggressive behavior and fantasy was found to be significantly lower; affiliative needs were not. As the title of the study implies the major purpose of the investigation was the effect of abuse on aggressive behavior and the results are positive in the direction of reduced aggression.

2. "The previously abused group will show more fantasy punishment needs than the non abused group." Rejected on the failure of responses to the Thematic Apperception Test to support this hypothesis.

3. "That the foster parents will show significantly greater tendency to punish, and see the child as aggressive, in the non abused group than the abused group." Accepted on results of the rating scale utilized.

4. "That the period of the child's life in which the abuse occurred will be significant, with severe punishment occurring before age three showing more lasting effects of response inhibition than abuse occurring during later years." Rejected on basis of the absence of significant difference between the scaled characteristics of "somberness," "aggression in the home," and "fantasy aggression to the T.A.T."

5. "That time elapsed since the period of abuse will not be

a significant variable in determining aggressive response inhibition." Accepted by the failure to find differences between children abused within and prior to the past five years on characteristics listed in number four above.

In addition to the hypotheses tested above a "profile" of the abused or battered child, several years after the abuse, emerged from the data. He tends to be non aggressive in both overt and fantasy behavior. Related to this, perhaps defensively, he wishes to appease others and is generally non competitive with others. As a consequence he is punished less by his parents who are also more tolerant of the aggressive behavior that he might exhibit. He is less liable to wander far from home but on the other hand is not seen by his foster parents as being unusually dependent upon them. He is less responsive to other people but more prone to self stimulation of primary needs through eating, masturbation, and thumbsucking. He communicates less with others, is less verbal, and more prone to stuttering than his non abused peers. The most salient feature about him is a quality of "somberness" which betrays the reduced level of affective, as well as behavioral, activity available to him. He is a passive and sad child.

There are perhaps two significant implications to this study. The first is the similarity of the children in the study with the usual description of the battered child immediately after the abuse occurred - generally "apathetic, withdrawn from stimulation,...resembling cases of shell shock in adults...a profound blunting of all the external manifestations of inner life" (Gladston, 1965). Six years later these same terms, although in lesser degree perhaps, could describe the same

children. Rather than recovering and expressing the expected suppressed hostility they still remain passively withdrawn.

The second implication, and related to the first, is the effect of severe abuse not only upon the child but upon the child's later effect on society. The consistent expectation and finding in the literature is that the abused and battered child, when he reaches maturity, will unleash his anger upon his own children or turn it upon society in asocial and violent fashion. Bender and Curran (1940) first noted the high incidence among histories of adolescent murderers of aggressive and abusive parents. Duncan (1958) reported a history of parental abuse in four of six men convicted of first degree murder. Easson and Steinhilber (1961) found results similar to Bender's in an analysis of eight adolescent murderers from reportedly "normal" families. Curtis (1963) appropriately titled his article "Violence Breeds Violence - Perhaps?" and concluded that violence did, in fact, usually breed violence.

The abused children of this study, however, ranging in age between seven and fifteen years with a mean of ten years, do not at this point in time seem to represent an aggressive threat to society. Whether this is an artifact of the sample, or evaluation methods used, is, of course, not known. If, moreover, the results are indicative of the characteristic traits of the abused child, before reaching adulthood, they do not preclude the possibility of later acting out of the anger and hostility which is difficult to believe does not exist at some level.

Of concern to the author throughout the study was the rather limited historical information available regarding incidents of abuse

in the experimental group. Conversely, absence of severe punishment or abuse could not be unequivocally stated for the control group. Although the results did indicate that the two groups were indeed substantially different in a number of predicted, and unpredicted, characteristics it is, however, suggested that future research on this subject utilize a study population where, if possible, the critical variables of type, severity, and time of the punishment experience are perhaps more fully controlled. In addition, information regarding characteristics of the abusive parents, and parent-child relationships, were not available for the children of this study but would add considerable depth to the understanding of the effects investigated.

CHAPTER FIVE

SUMMARY

The purpose of this study was to investigate behavioral and personality characteristics, particularly those related to aggression, of children who had previously suffered severe physical abuse or punishment at the hands of their parents or parent surrogates, and who had subsequently been removed from parental custody and placed in foster homes. The humanistic and social concern for the effects of child abuse and the "battered child's" later effect upon society suggested the need for this research.

Twenty foster children with a mean age of 10.6 years and a substantiated history of physical abuse were compared with a matched number of foster children without such a history on the results of behavioral rating scales and the Thematic Apperception Test. The children's foster mothers, welfare caseworkers, and classroom teachers were used as raters and the T.A.T. was individually administered to each child. The abused children were further subdivided for data analysis on the basis of type of abuse incurred (specific incident versus prolonged severe punishment), age at the time of abuse (under and over three years), and duration since the abuse occurred (within or prior to the past five years). The T.A.T. was scored for n aggression, n affiliation, and punishment press using a frequency count, corrected for length of stories, of connotative words.

The results persented a profile of the abused child, as compared to the control group, of significantly <u>less</u> overt and fantasy aggressive behavior, as well as lower ratings on competitiveness, truancy,

quarrelsomeness, destructiveness, and verbosity. The abused child was significantly higher in the scaling of "somberness," "docility," desire to placate, appetite, masturbation, and thumbsucking. Foster mothers were also found to be more permissive of aggression by the previously abused child and to see them as less aggressive in the home. n Affiliation and punishment press were not found to differentiate the two groups on the T.A.T.

Fantasy aggression was expressed more frequently to the T.A.T. by children who were abused before the age of three years and by those with a history of prolonged severe punishment as opposed to specific incidents resulting in reported injury.

The major implications of the study were: (1) the apparent long term duration of the effects of child abuse in the similarity between the reported apathy of children immediately after the abuse occurred, and five years later, as was the mean duration of the present sample; (2) the incongruity between the lack of aggressive behavior in the abused children of this investigation and the results of previous studies showing a high incidence of early parental abuse in the history of adolescents and adults who later commit crimes of violence or acts of abuse upon their own children.

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A P P E N D I C E S

APPENDIX A

RATING SCALE OF FOSTER PARENTS" PERCEPTION OF, AND CHARACTERISTIC RESPONSE TO, CHILD'S AGGRESSION (from Sears, et al., 1957, pp. 234-256)

Name_____
Sample No._____
Date_____

A. Amount of Aggression Exhibited by Child in the Home, Excluding that Toward Siblings

____1. None. Child has never shown any aggression toward parents, and mother does not mention any other displays of temper.

____2. Mild. Occasional minor outbursts, but generally even-tempered.

____3. Some.

____4. Quite a bit of aggression.

____5. A great deal. Often screams, hits. "I have had a real problem with tantrums."

B. Permissiveness for Aggression Toward Parents

____1. Not at all permissive. Believes this is something one should not permit under any circumstances. Always attempts to stop child immediately; neither verbal nor physical aggression permitted.

____2. Slightly permissive.

____3. Moderately permissive. Feels that one must expect a certain amount of this, but that it should be discouraged rather firmly. May permit some "sassing" but no hitting.

____4. Quite permissive.

____5. Completely permissive. Does not attempt to stop child from hitting parent or shouting angrily at him. May express belief that child has right to hit parent if parent has right to hit child.

C. Permissiveness for Aggression Among Siblings

____1. Not at all permissive. Parents try to stop quarreling and fighting immediately. Punish severely.

____2. Slightly permissive.

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____3. Moderately permissive. Stop if somebody getting hurt; may allow verbal battles if they don't go on too long. Scolding given but not severe punishment.

____4. Quite permissive.

____5. Entirely permissive. Mother never interferes in children's quarrels; they are allowed to fight it out. Parents do not try to stop or prevent this.

____ No siblings in home.

D. Permissiveness for Aggression Toward Other Children

____1. Not at all permissive. Parent always tries to stop or prevent fights. Child severely punished for fighting.

____2. Slightly permissive.

____3. Moderately permissive. Parent will not interfere unless someone is getting hurt. Child may be scolded for fighting, but not severely punished. Mother will let quite a bit of it go on.

____4. Quite permissive.

____5. Entirely permissive. Mother never interferes, never tells child she does not want him to fight. Considers it natural, part of growing up.

E. Level of Parents' Demands for Child to Be Aggressive Toward Other Children in Appropriate Situations

____1. None whatsoever. Parent explicitly says she does not want child to fight with other children—ever. Child encouraged to come home if going gets rough.

____2. No demands to fight, but no statement that it should always be discouraged.

____3. Slight demands for fighting. If child is really being bullied, he should defend self, but in general should not fight.

____4. Moderate demands for fighting. Should defend self, but never start fights, and not hit back if other child is smaller.

____5. High demands for fighting. Child should never take anything from other children; important to hold up one's own end, not come asking for help.

F. Severity of Punishment for Aggression Toward Parents

____1. No punishment has ever been given in any way for this, although he has shown such aggression.

____2. Mild punishment.

____3. Has had moderate punishment; been scolded, sent to room for short periods. Parents have shown irritation.

____4. Has had considerable punishment. Parents may have slapped or bitten child back, and have been emotional in their reaction.

____5. Severe punishment. Parents very angry or hostile; beatings, severe deprivation of privilege, etc. "Punished him so he wouldn't forget it."

G. Severity of Punishment for Aggression Toward Siblings

____1. No punishment has ever been given in any way for this, although he has shown such aggression.

____2. Mild punishment.

____3. Has had moderate punishment; been scolded, sent to room for short periods. Parents have shown irritation.

____4. Has had considerable punishment. Parents may have slapped or bitten child back, and have been emotional in their reaction.

____5. Severe punishment. Parents very angry or hostile; beatings, severe deprivation of privilege, etc. "Punished him so he wouldn't forget it."

H. Severity of Punishment for Aggression Toward Others Outside the Home

____1. No punishment has ever been given in any way for this, although he has shown such aggression.

____2. Mild punishment.

____3. Has had moderate punishment; been scolded, sent to room for short periods. Parents have shown irritation.

____4. Has had considerable punishment. Parents may have slapped or bitten child back, and have been emotional in their reaction.

____5. Severe punishment. Parents very angry or hostile; beatings, severe deprivation of privilege, etc. "Punished him so he wouldn't forget it."

APPENDIX B

CHILD'S BEHAVIOR RATING SCALE
(after MacFarlane, et al., 1962, pp. 14-62) Name_____
Sample No.__
Date_____

I. Biological Functioning and Control

A. Daytime Enuresis

____1. Completely absent in last six months.
____2. One episode in last six months.
____3. An average of one episode per month when evidence of tension. Damp two or less times a week but no real loss of sphincter control.
____4. An average of two to four episodes a month, involving real loss of sphincter control. Damp twice a week or more.
____5. An average of two or more episodes a week.

B. Nocturnal Enuresis

____1. Completely absent in last six months.
____2. One episode in last six months.
____3. An average of one episode per month when evidence of tension. Damp two or less times a week but no real loss of sphincter control.
____4. An average of two to four episodes a month, involving real loss of sphincter control. Damp twice a week or more.
____5. An average of two or more episodes a week.

C. Appetite

____1. Voracious eater—never satisfied; east markedly more than average child. Greediness past point of hunger.
____2. Above average—enthusiastic about eating. Daily gets hungry and asks for food between meals.
____3. Average—normal amount. Takes eating for granted. Usually hungry at meal times. This includes child who gets hungry four or five times a day and eats small amounts at any one time but who has a normal total intake. Occasionally asks for fruit between meals.
____4. Below average—not interested, eating a bore. Variable or generally below average. Less severe than (5). Never asks for food between meals. Also included in this group are children who are not hungry at meals because candy is eaten between meals.
____5. Markedly inadequate appetite, never really hungry. Eating very unpleasant chore. Child reports he "hates" to eat and mother verifies it. Satisfied with unusually small amounts.

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D. Excessive Modesty - Exhibitionism

____1. Compulsive exhibitionism (exposure)—urinating in public, etc.
____2. Pleased with body. Mild cavorting to show off. Consciousness; no tension.
____3. Unconcerned around family, physician, playmates (where parents do not disapprove). Includes cases where girl has been taught not to be undressed in front of father or older brothers; or boys in front of mother and sisters. Includes also adolescents who change from earlier freedom in this respect to habits of privacy. Verbal fuss about getting undressed for examination but no real tension—merely adopting social mores. When exhibitionism is used as a device to annoy parents, but where child has no concern about it (for example, young children wetting on the lawn).
____4. Self-conscious when undressed; ill at ease; keeps covered; obviously embarrassed and uncomfortable.
____5. Extreme modesty (never lets anyone see him undressed or partly undressed). Very upset during physical examination, even when physician is of same sex. Panicky even when seen in underclothes.

E. Masturbation (Will vary with maturity.)

____1. Absence of overt behavior and no apparent tension.
____2. Occasional or perfunctory touching of genitalia (when needs to go to toilet, during bath, or in response to physical irritation or too tight clothes) with absence of tension about it.
____3. Absence of overt behavior but considerable tension about it; or infrequent (1 or 2 times in six months) episodes.
____4. Vigorous stimulation once or twice a week or mild habitual touching more frequently (ticlike pulling at genitalia many times a day).
____5. At least three or four times a week or more, vigorously stimulates genitalia by manual stimulation with or without orgasm, depending upon physiological maturity; or involving orgasmic equivalent (excitement followed by relaxation); rubbing against furniture, floor, causing friction with clothes. (Individual or social participation.) Includes severe cases where child publicly and compulsively masturbates. (Only direct stimulation of genitalia classified under this heading—rocking, etc., where there does not appear to be actual friction occurring, is not so listed. Symbolic interpretive behavior not included.)

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F. Sex Interest

____1. Neither interest nor tension—either because underdeveloped or because the matter has been accepted in prosaic, matter-of-fact way.

____2. Interest in facts without undue tension. Healthy interest, happy affect. May include considerable talk about growing up, getting married, having children, what the boy friend or girl friend says and does, etc., but pleasure evidenced and no apparent strain.

____3. Transitory periods of tension. Reactive to new and normal experiences or talk but no lasting affect. Includes tension when discussion of topics relating to sex occurs outside of accepted group. Group 3 is designed to cover typical behavior for any age level, with its temporary variations. Includes teasing behavior—for example, at early ages (6 to 8 years or below) pulling up girls' skirts, etc., or at later ages teasing without much real tension.

____4. Less intense concern than (5), but still considerable tension (in terms of comparison with own social and age group)—evidenced in talk, experimentation, withdrawal, or anxious silence.

____5. Great and persisting preoccupation and tension—whether overt, involving compulsive or frequent talk, compulsive behavior or experimentation or repressed, involving panic, flight, or embarrassed silence. Marked embarrassment and discomfort upon seeing family members characteristically demonstrative.

II. Motor Manifestations

A. Convulsive and Motor Habits

____1. Absence of observed mannerisms or ticlike behavior.

____2. Few minor transitory mannerisms, for example, rubbing eye, etc. Diffused, unstereotyped, motor discharge or activity.

____3. When child is overfatigued or under emotional pressure or when discussing some emotional topic or when preoccupied, consistently resorts to mild motor ticlike patterns.

____4. Persistent mannerisms. Less often or severe than (5). Obvious enough to be noticed by anyone. Clearing throat, sniffing, hunching up shoulders, squinting, twitching of any facial muscles, tapping with feet, etc.

____5. Compulsive, pronounced, ticlike behavior occurring daily whether obviously ritualistic or not, and whether involving only small muscle groups. Either severe or frequent or less severe but going off many times a day. (By severe is meant involvement that compels attention of anyone.)

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B. Nailbiting.

____1. Never bites nails; if nails are broken or rough, uses file or scissors or asks mother to.
____2. Mild periodic biting of nails, or pulling of rough nails.
____3. Mild persistent biting of nails, always evidence of chewed nails.
____4. Nails kept chewed down; less severe than (5), but fingers not disfigured.
____5. Extreme and persistent biting of nails or cuticle around nails. Bitten "down to the quick"; fingers disfigured.

C. Thumbsucking. (Lipsucking, tongue sucking, or blanket sucking, included under tics and mannerisms.)

____1. Never sucks thumb.
____2. Mild episodes of sucking thumb; not daily.
____3. Sucks thumb daily but not so much as (4); only when tired, sleepy, or emotionally upset.
____4. Not so extreme or so persistent as (5), but thumb in mouth more than ten or fifteen minutes daily.
____5. Persistent and vigorous thumbsucking occurs major part of time. Callouses may or may not be present but evidence of water-logged skin).

D. Activity (Hyperactive; underactive)

____1. Extreme inactivity (regardless of cause); inert; sits; walks slowly; never runs; tightened inactivity. Little or no movement but muscles rigid—includes catatonic-like inactivity.
____2. Underactive; whether due to lack of physical energy or to emotional preoccupation. Prefers quiet sedentary games.
____3. Normal activity—takes in robust children with high energy level. Able to sit quietly when interested; or may fidget when forced to sit still in a boring situation. Includes transitory reactive overactivity to a disturbing or exciting situation.
____4. Definitely above average in restless activity. Very seldom able to sit at quiet games. Fidgets or moves constantly when read to, even when interested. Not so extreme as (5), but obvious enough and characteristic enough to be noticed by anyone.
____5. Extreme overactivity and restlessness. Can never be free from activity when awake. Appears propelled by internal drives; activity not reactive to external situation. Activity constantly upsets routine and order. An extreme nuisance.

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E. Speech: Articulation (Infantilisms of pronunciation, letter substitution, difficulty with consonant sounds, lalling, lisping, slurring, monotone, or high-pitched voice, inadequate or excessive volume whether or not on a structural basis or merely functional).

____1. Excellent enunciation; precise, clear, unslurred sounds.
____2. Enunciation not conspicuous in any particulars and no specific defects.
____3. Mild habitual speech defects-mild letter substitution, lisping, etc., but not occurring throughout vocabulary range; limited to a few words or to a few letter combinations.
____4. Enunciation consistently poor; can be understood if attended; or can be understood readily but is striking in some of the respects below.
____5. Enunciation so poor that speech is very difficult to understand or so unusual in any of the above aspects that it compels attention from anyone.

F. Speech: Stuttering (involving incoordination of the respiratory disphragmatic, and laryngeal mechanisms-shown in hesitancy or blocking in speech; jerky, unrhythmic utterances; or repetition of words or sound units).

____1. Never stammers or blocks-glib, easy speech.
____2. Occasional blocking under very embarrassing situation-when frightened, etc. Imitative stammering lasting no longer than a week or two. Confusion in talking on emotional topics.
____3. Occasional episodes of blocking (two or three times a week). Imitative stammering with no tension. Under tension-confusion, blocking or halting not so severe as (4) or (5) but enough to attract attention from any listener.
____4. Marked stammering, occasionally or at least once or twice in a ten-minute conversation; or mild persistent blocking present in any conversation. Intense stammering as severe as (5), but in periods lasting a week or so at a time; then improving for a period, only to recur. Severe enough that it causes discomfort to any listener but conversation can be carried on.
____5. Severe stammering, more or less persistently present. So acute at times that is unable to get out any sentences. So severe that it characteristically causes acute discomfort to anyone listening. Blocking resulting in temporary complete loss of speech.

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III. Social Standards

A. Lying

____1. Never tells lies regardless of provocation and consequences-whether due to extreme and rigid honesty or due to fact that situation is so easy that child has no real provocation.

____2. Lies only under stress, and with a little pressure from himself or others, admits truth easily. Includes occasional protective distortions in interview situations but not characteristic in usual situations.

____3. Lies occasionally-to avoid scolding, punishment, or under pressure to make good impression. Not characteristic in all situations but occurs often enough to be a problem.

____4. More frequent than average-lies habitually in almost any emergency situation either directly or by implication-to serve an immediate purpose; does not include the diffuse lying classified under (5). Includes easily detected impulsive lies, as well as more complicated and less apparent distortions.

____5. Frequent, habitual first reaction to deny or distort facts. Compulsive lying when no immediate purpose seems to be served, or lying or distortion of facts is a characteristic pattern for gaining own ends, even when the truth would be as effective.

B. Truancy from Home

____1. Never, or practically never, leaves without permission. Reports home promptly; phones if he has to be late.

____2. Occasionally (two or three times a week) goes to playmate's home without permission, but not at marked variance with parents' attitude. One or two times a week slow about getting home from school.

____3. Once a month wanders off short distances at variance with parents' wishes. One long trip in six months. After school, more than half an hour's loitering against parents' expressed commands-more than half the time.

____4. At least once a week wanders off from home at variance with parents' wishes; or two times in six months has wandered off and gone long distances (as defined below).

____5. Oftener than once a week wanders off from home against orders. Three or more times in six months goes long distances either defiantly or compulsively. Long distance (1) for preschool child, several blocks; (2) primary grades (6 to 10 years), more than a mile; (3) more than 10 years, away from own town or city or several hours' distance from home.

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C. Truancy from School

____1. Has never been truant.
____2. Only one episode of truancy in a year.
____3. Truant one to three times in six months; includes absence due to admitted malingering on the part of the child even though successful with parents.
____4. Truant less than once a week but more than three times in six months on the average.
____5. Habitually truant (whether or not condoned by parents). Never attends except under constant pressure. Once a week or more in frequency, on the average.

D. Stealing (Ratings largely on frequency and severity as based on social standards and irrespective of home standards or whether stolen property is used for self or shared socially.)

____1. Never takes anything-a strong sense of the property rights of others. Reports or tries to locate owner of money, toys, or other articles found.
____2. Occasionally careless about returning "borrowed" or found property.
____3. Occasional episodes of mild pilfering outside of own home-fruit, candy, flowers. One or two episodes in six months of five-and-ten variety, or taking money from parent's purse.
____4. Chronic petty pilfering whenever an opportunity presents itself (for example, money from parent's purse, five-and-ten-cent stores, etc.); or two times in six months more valuable things.
____5. Persistent stealing-total disregard or defiance of property rights of others. Compulsive episodes two or three times in six months, regardless of motivation. An acute problem, whether due to frequency or value of things taken.

E. Destructiveness (or excessive protective concern of objects).

____1. Excessive care and protection of objects; can't enjoy or let others enjoy toys or possessions. Can never have a good time for fear of mussing clothes.
____2. Very careful of toys, furniture, dishes, etc. Cares for them and puts them away but not so fussy that he can't enjoy them.
____3. Occasional accidents; destructive through curiosity, but some sense of caution; normally careless for his age.

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____4. More destructive that average child of his age. Valuable things of others taken apart, even though motivated by curiosity. Once or twice in six months anger expressed in destruction of own property or that of others.

____5. Destroys own things and others', either in anger, retaliation, or extreme carelessness (that is, own toys ruined within week or so after receiving them). Compulsive urge to spoil toys, clothes, belongings of others.

F. Selfishness (in sharing or excessive generosity).

____1. Wants to give all his things away; excessive generosity. Compulsive sympathy. Atonement generosity-for example, gives presents to make up for misdemeanors.

____2. Enjoys sharing with others, giving presents. Saves candy for sibs.

____3. Shares normally with those who share with him; may save out favorite toys for own use; or doesn't share with children who might destroy his playthings.

____4. Shares under pressure or reluctantly; unhappy when forced to share; or doesn't share because it never occurs to him-simply concerned with own feelings of possession.

____5. Strong resentment against sharing; takes everything for self. Always unhappy unless he gets the biggest portion. Rushes in to help himself first if there is not enough to go round. Hides things so he won't have to share them.

G. Quarrelsomeness (or excessive striving to placate). (Regardless of motivation-for example, jealousy, introverted rigidity, or social tension.)

____1. Real drive to placate; refusal to quarrel either by withdrawal or excessive yielding to opponent. Very disturbed or uncomfortable at the least sign of friction.

____2. Indulges in less quarreling than the average; because not in a quarrelsome environment or because he has good techniques for sidestepping friction.

____3. Quarrels with real provocation; occasionally starts quarrels. Child on whole gets along well but may have one playmate who antagonizes him to the point of quarrels.

____4. Quarrels more than average child. Starts more quarrels, responds more extravagantly to a little antagonism in others, but not so extreme as (5) and not so characteristic.

____5. Pronounced tendency to constant quarreling. Has a chip on shoulder; provokes quarrels. Characteristic response to any difference of opinion in play or work situations. Instigates quarrels with little or no apparent provocation.

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IV. Personality Characteristics

A. Excessive Emotional Dependence or Independence

____1. Aggressively independent; cuts off from any close emotional attachments; or so narcissistic that he is incapable of close attachments.

____2. Friendly, easy, emotional attachments-not excessively possessive or demanding although a close and happy relationship may exist. Self-sufficient but friendly.

____3. Normally dependent in appropriate situations, independent in others. Emotional give and take. May have periods of mild regressive behavior when comfort is sought but not characteristically. Leans on parent or blames parent in some trying situations but on the whole, dependence not excessive for age level.

____4. More dependent and emotionally tied than average, but less extreme than (5) although covering similar items. Has some emotional values not tied up in parents but characteristically in any trying situation seeks parental sheltering and bolstering.

____5. Extreme emotional dependence upon parents or others (nurse, sibs) which may be shown in a variety of ways-in constant attention demanding, in extravagant waiting on parents, in extreme overreactivity to parents' mood. Parents' approval or disapproval dominates completely child's interests and values. Parent fixation-evidence of intense attachment whether evidenced in hostility or hectic devotion; stable or ambivalent.

B. Excessive Demanding of Attention

____1. Usually self-reliant; self-approval more important than social approval or disapproval. Can entertain self for long periods. Own audience. Enjoys activities for their own sake.

____2. Less interest in attention from others than average; occasional need for attention but for most part absorbed in interests or unaware of attention from others.

____3. Enjoys attention but interest in activities only partly dependent on approval or disapproval from others. Seeks attention if it's available but functions easily without it if it is not.

____4. Demands more attention than average-directly or indirectly. Less persistent or extreme than (5), but enough to be apparent and annoying even to a casual visitor.

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____5. Constant demanding of attention shown in a variety of ways. For example, a younger child wants constant service, demands to be dressed, fed-wants things done for him that he can easily do for himself. May be due to indulgent training or due to a constant drive to get security by having people wait on him, buy him presents, show him special consideration. Very unself-reliant, insecure, restless, anxious without attention constantly from others.

C. Extremely Sensitive - Callous. (Either with reference to self or others. Classification not necessarily made on a basis of permanent personality patterns but characteristic of behavior existing at time of interview.)

____1. Callous - markedly insensitive, indifferent, unconcerned, or thickskinned. Impervious to criticism from others and markedly unself-critical. Insensitive or indifferent to the feelings of others. Unaware of many values that a normal person would consider fundamental.

____2. Takes more criticism than average to "hurt feelings." Matter-of-fact, impersonal, realistic acceptance of proficiencies and deficiencies, personality characteristics and intelligence; or completely unself-conscious.

____3. Normal responsiveness to approval and disapproval. (Includes the large bulk of children who are sensitive on one or two items.) Reactive to real situations but gets a working solution so that inadequacy doesn't pervade whole personality except episodically.

____4. More liable to have hurt feelings than average - thin skinned; excessive discomfort. Same sort of reactions as in (5) but much less extreme. Depreciatory or sensitive in some fields but in other fields not unduly so. Constant evidence that size, deformities, etc., interfere with social adjustments. To get along has to have an environment more protective than average or has to adjust to a level far below potentialities (for example, has to associate with people really inferior to himself - younger or less intelligent playmates) in order to feel comfortable.

____5. Supersensitiveness in regard to social relationships, clothes, size, intelligence, etc. Extravagantly easy to hurt his feelings. Either self-centered or exploitable at criticism, mistreatment, or troubles of others. Overreactivity (tears, running from situation, worries) to sad stories. Paranoid reactions. Extreme guilt mechanism whether projected or having self-reference.

D. Extreme Timidity - Bravado (in physical situations). Not to be judged from the point of view of an overanxious parent, but in terms of other children.

____1. Ignores real danger; daredevil, foolhardy. Takes knowingly all sorts of chances for the thrill of it.
____2. Takes and enjoys more chances than average child; among the first to try out new slides, etc. Adventurous but not foolhardy.
____3. Normally cautious; enjoys mild chances - in certain new situations shows cautiousness. Overcautious in one specific situation (for example, fear of swings, after bad fall) but not a pervasive reaction.
____4. More cautious than average - watches others first before participating; always tense so that efficiency is interfered with. (This does not include pretended timidity used by girls as a social technique.)
____5. Extreme fearfulness or apprehension in any new situations or where there is nothing of physical danger. Always magnifies any dangers. Won't try out activities even when he sees all his playmates doing so.

E. Pronounced Shyness - Extreme Friendliness

____1. Exceptionally easy and quick social contacts. Completely at ease in almost any group or with almost any person. Enjoys meeting new people.
____2. Characteristically at ease whether friendly, unexpansive or indifferent to the social situation. Practically never "rattled" by a social situation.
____3. Easy with certain types of adults or children, not with others. Or easy with one sex but somewhat uncomfortable with the other. Shy but makes effort to overcome it in most situations. Not shy around people he knows and likes.
____4. Shy - standoffish, easily embarrassed, anxious. Waits for the other person to make the first friendly gesture. Very shy only with certain types of people, either sex. Acute discomfort at meeting a group, although successful with individuals, or vice versa. So shy that he's handicapped in reciting at school or in play relations with the group into which he is thrown. Very uncomfortable around the friends of his family or makes straining efforts to appear at ease, but shows unmistakable tension.
____5. Exceptionally shy, acute discomfort to the point of panic, withdrawal of antagonism in social situations or in meeting new acquaintances - any age, either sex, individual or group contacts. Not at ease even with friends he's known a long time. Avoids situations where he will meet people; won't look at people, hangs head, etc. Can't respond even when other persons or playmates make friendly overtures. Social contacts characteristically a hazard.

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F. Specific Fears

____1. No fear. (Legitimate caution in presence of poisonous snakes, etc.)
____2. Slight apprehension (for example, mild fear of dark, dogs, etc.) but doesn't withdraw from situation if someone else is around.
____3. No real panic, but acute discomfort - for example, always gets someone to go with him into unlighted rooms, wants light left on, crosses street to avoid meeting all dogs, shows evidence of tension when fire, bogie man, burglars, etc., are mentioned.
____4. Upsetting, intense, but less disorganizing than (5). Includes flight from situation rather than the paralyzed action of (5).
____5. Extreme, acute fear or fears - paralyzing, incapacitating, completely dominating behavior. Occurs every time child is in the presence of a dog, high place, fire, dark, when it thunders, when he sees a man with a beard, etc., or when he hears talk of such things. (Marked vasomotor responses.) This group concerns intensity of reaction to one or more specific situations.

G. Extreme Swings of Mood - Unusually Stable

____1. Unusually stable; even keel in face of disturbing or changeable situations. Stolid or unreactive.
____2. Takes considerable provocation to produce mood swing. Runs on even keel - always find him the same except under very unusual situations.
____3. Normal responsiveness - no extravagant swing without real cause (for example, somberness in face of a somber situation but normal recovery when situation eases up).
____4. Mood more variable than average for age whether motivated internally or exaggerated responsiveness to real situations; frequent but not persistent mood changes - ups and downs lasting only a day or part of a day, but mood so volatile that one can never count on child. Characteristically overreactive make-up.
____5. Extreme instability of mood. Either internally motivated or reactive. Marked variability; periods of real depression or elation. (Real evidence of childhood equivalents of manic-depressive trends - periods of inactivity, low spirits; overactivity and high spirits.)

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H. Somber - Gay (If associated with mood swing, it may be necessary to check both (5) and (1) or (5) and (4), if within the past six months both ends of the descriptive scale have been reached).

____1. Constant, bubbling gaiety. Characteristically over-optimistic (even in face of trying situations), whether compensatory or direct.
____2. More cheerful than average - smiles easily, full of fun. Characteristically optimistic - light-hearted, spontaneous, no evidence of strain or compensatory "gaiety."
____3. For most part happy - occasional reactive somberness and appropriate seriousness. Not outstanding either as far as somberness or gaiety are concerned.
____4. Much more somber, less happy than average. Here again either stable seriousness or reactive seriousness or depression are included, but the degree is less marked than in (5). Characteristically serious minded - takes life heavily. Can't be flippant or casual about anything. May or may not be associated with worrisomeness or anxiety. Spontaneous gaiety very uncharacteristic but may respond mildly to gaiety of others.
____5. Very somber or sad whether a stable personality characteristic or a depressive swing. Very difficult to make smile or laugh, marked lack of gaiety and fun - unresponsive to the gaiety of others.

I. Negativistic - Suggestible

____1. Excessive suggestibility - docility, no values of own. Does anything anyone tells him to. A "yes man."
____2. Follows routine as a matter of course. Accepts suggestions more easily than average; minding not a matter of competition. Enjoys cooperation in social situations; open-minded.
____3. Fairly pliable; occasional resistive episodes; reactive stubborness. The child who rebels against fretful or stupid techniques is included here.
____4. Resistive above average to suggestions, but not so extreme as (5) or periodic sprees of (5), in relation to one or two people. More difficult to fit into daily routine than average. Habitually takes the "opposite" side of an argument.
____5. Extreme and pervasive negativism. Habitual resistiveness and rigidity or compulsive habitual urge to do the opposite of what is expected, or to do nothing. Emotional attitude is "No, I won't."

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J. Irritable - Placid. Largely physiological or tensional irritability, overactivity, etc.

____1. Extremely phlegmatic; not irritable (with real provocation). Fretful overreactivity practically never occurs, whether due to a less irritable organism or a nonirritating environment.
____2. Rarely annoyed or disturbed; less irritably reactive than average child. Unreactive where most children would be annoyed.
____3. Normally reactive; occasional flare-ups. Nothing outstanding in either direction characteristically, but has fields or situations of easy annoyance. However, behavior not characteristically pervasively overreactive.
____4. More irritable, fretful, and reactive than average. Less extreme irritability and not such marked overreactivity as (5), but easily fretful, startled, or extravagant reactivity to an annoying situation.
____5. Chronically irritable or fretful and chronically marked fretful or irritable overreactivity (high strung). Trigger responses or marked effort at inhibition followed by explosions. Child characteristically "on edge" so that slightest thwarts or startles set him off. Extreme annoyance at ticking of clocks, at clothing, smells, etc. (Very easily upset by sensory environment.) Characteristic irritability of the rigid introvert.

K. Temper Tantrums: Severity

____1. Anger reactions practically nonexistent.
____2. Fretting or mild nonovert anger. Reactive to irritation.
____3. Mild activity or less intense screaming than (4). Less intense verbally expressed anger. Severe as (4), but over in a minute. Staged mild temper behavior with little or no involvement - can stop performance immediately.
____4. Screaming with activity (for example, stamping feet); verbal attacks less severe than (5). Emotional involvement not so severe that complete loss of control is evidenced; some direction of activity is possible. Includes severe patterns of overt behavior with little involvement - for example, as a technique to upset or own ends.
____5. Severe explosions - (a) biting, kicking, striking, throwing things, destruction of property, banging head; (b) verbal explosions - swearing, screaming, shouting accompanied by marked emotional reactions. Anger completely dominates the behavior. Complete loss of control.

L. Temper Tantrums: Frequency

____1. Once a month or less.
____2. More than one time a month but not more than once a week.
____3. Two or three times a week.
____4. Once a day (four times a week or one time a day on the average).
____5. Several times a day (twice or more).

M. Jealousy. Competitive attitude in the field of affection, whether shown in aggressive or withdrawing behavior, in persistent dreams, in verbal criticisms, or compensatory solicitude.

____1. Never jealous; no evidence of competitive attitudes in the fields of affection, either because unaware or indifferent because little is at stake in a relationship.
____2. No real jealousy. Aware when others are shown affection or granted more favors, but not really upset. Companionable or protective. May want reassurance of affection occasionally, but is readily satisfied.
____3. Occasional mild jealousy but not a pervasive patterns. Hurt feelings over attention to others shown either by withdrawing, loss of gaiety, showing off, or misbehavior, etc., to attract attention to self. Occasionally complains that sib gets the best of everything. Some tension but not unduly emotional about it.
____4. Less extreme than (5), but a constant source of tension. Always uncomfortable when others are praised or shown affection. Or mild withdrawing, loss of gaiety, or insists upon equal or greater attention.
____5. Extreme jealousy pervading whole personality. Overt attacks; bites, hits, or verbally abuses or lies to damage anyone regarded as a competitor in affection; or to anyone whose affection he wants unshared with others. Or marked tension shown in withdrawing behavior, hurt feelings, tears, or silent suffering with a marked letdown in gaiety, spontaneity, and confidence.

N. Competition

____1. Sensitive to competitive situations but gets disorganized, is let down, unproductive, or flees from them. Resistive in negative way. Extremely discouraged about his abilities; or appears to seek defeat compulsively.
____2. No real competitive relationship; enjoys games for the fun of playing them but relatively unimportant who wins.

____3. Is stimulated by competitive situations and enjoys excelling, but can accept defeat without much strain. Periodic competitive sprees but not persistent and pervasive nor extreme.

____4. Enjoys excelling competitor to the point of being upset when he loses; takes his failure to win very hard, or can't restrain an overt expression of satisfaction when he wins. Not so extreme as (5) but characteristic and noticeable by anyone with whom he comes in contact.

____5. Extreme or hectic drive to excel competitors; either won't play if he can't win, or always picks inferior opponents, or cheats to win. Beating his competitors practically his only satisfaction in a play or work situation. Competitive drives dominate major part of his activities - a diffused set extending to many people and to all sorts of situations which to most children would not be competitive.

O. Reserve - Spontaneity. Concerns degree of expressiveness of affection, anger, sorrow, joy, disappointment, aspirations, feelings of inadequacy. The problem nature of any of the following descriptions depends upon the community mores; obviously the rating (4) would be more a problem in a volatile community than in a community with reserved habits and values for reserve.

____1. Markedly more expressive and less inhibited than average or than social mores approve. Identifies himself wholeheartedly with his feelings of the moment and expresses them without consideration of social expediency. Lives out one emotional role after another; even highly ambivalent ones in turn. "Is terribly sweet when he's sweet and terribly naughty when he's naughty." Emotional exhibitionism.

____2. More expressive than average. Either very spontaneous and volatile, "wears his feelings on his sleeve," or open, uninhibited, unashamed expression of integrated feelings.

____3. Normally expressive. Reserved around some people but not around others. Certain feelings unexpressed and kept to himself. May express affection but not anger or vice versa. However, not extremely reserved or extremely expressive in any field. Has for most part his inhibitory and expressive habits adjusted to the mores of his social group.

____4. More reserved than average. Expresses feelings only around one or two persons. Never a full expression of feelings.

____5. Extremely reserved, practically never expresses feelings involved in any of the above fields. Extremely inhibited emotionally. So reserved that he characteristically produces feelings of strain and awkwardness in those around him in response to his own strain and awkwardness. Tied up emotionally; extreme sense of privacy about all feelings.

P. Unself-reliance

____1. Vigorously refuses any assistance. Strongly opposes any assistance thrust upon him.
____2. Never asks for assistance in routine tasks; avoids it if possible, and protests mildly when it is given.
____3. Performs most routine tasks automatically, without asking or waiting for assistance. Accepts help if given, especially for difficult tasks. May expect and ask for help with difficult tasks.
____4. Prefers and asks for help in performing routine tasks, but will do them himself if urged, or if left alone. Verbally protests at not being assisted. Dawdles.
____5. Always insists on being helped with routine tasks - dressing, washing face and hands, etc. Will not perform tasks if left to do it alone.

*Order of items have been reversed to facilitate statistical analysis.

APPENDIX C

CHILD'S RATING SCALE
OF
PARENT

Name_____
Sample No._____
Date_____

(Use phrase "foster" mother, etc. if child so differentiates)

A. Child's rating of permissiveness of parents to child's aggression toward parents.

1. Q. What does your mother do if you get mad and want to hit her or yell at her?

____1. Not at all permissive. "Whips" or spanks child severely and immediately.

____2. Slightly permissive. Threatens severe punishment, or spanks lightly.

____3. Moderately permissive. Tells child to "behave," threatens delayed mild punishment.

____4. Quite permissive. Doesn't allow child to hit but does not punish for threats or temper outbursts.

____5. Completely permissive. Allows child complete freedom to hit or "sass."

2. Q. What does your father do if you get mad and want to hit him or yell at him?

____1. Not at all permissive. "Whips" or spanks child severely and immediately.

____2. Slightly permissive. Threatens severe punishment, or spanks lightly.

____3. Moderately permissive. Tells child to "behave," threatens delayed mild punishment.

____4. Quite permissive. Doesn't allow child to hit but does not punish for threats or temper outbursts.

____5. Completely permissive. Allows child complete freedom to hit or "sass."

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B. Permissiveness of parents to child's aggression toward siblings.

Q. What do your parents do if you get mad and want to hit or yell at your brother or sister?

____1. Not at all permissive. "Whips" or spanks child severely and immediately.

____2. Slightly permissive. Threatens severe punishment, or spanks lightly.

____3. Moderately permissive. Tells child to "behave," threatens delayed mild punishment.

____4. Quite permissive. Doesn't allow child to hit but does not punish for threats or temper outbursts.

____5. Completely permissive. Allows child complete freedom to hit or "sass."

C. Permissiveness of parents to child's aggression toward others outside the family.

Q. What do your parents do if you get mad at one of your neighbors and want to hit or yell at them.

____1. Not at all permissive. "Whips" or spanks child severely and immediately.

____2. Slightly permissive. Threatens severe punishment, or spanks lightly.

____3. Moderately permissive. Tells child to "behave," threatens delayed mild punishment.

____4. Quite permissive. Doesn't allow child to hit but does not punish for threats or temper outbursts.

____5. Completely permissive. Allows child complete freedom to hit or "sass."

D. Who spanks (or punishes) you more?

____1. father

____2. mother

____3. neither

____4. both the same

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E. If you got hurt who would you want to take care of you?

____1. father

____2. mother

____3. either

____4. other

F. Would you like to go back to live with your (real) mother and father (or either if separated)?

____1. yes, both

____2. yes, mother

____3. yes, father

____4. no, neither

____5. no, mother

____6. no, father

____7. no other

____8. don't know

VITA

Richard Hummel Rolston was born in Baton Rouge, Louisiana, on December 16, 1930. After attending grade school and junior high school at the Louisiana State University Laboratory School in Baton Rouge he transferred to El Paso High School where he graduated in 1947. He then attended New Mexico Military Institute and Louisiana State University before entering the U. S. Army as a commissioned officer during the Korean War. Following his honorable discharge he returned to Louisiana State University where he received the F chelor of Science degree in 1956. In the fall of the same year he began his training for the Ph.D. degree in clinical psychology at L. S. U. and subsequently completed his clinical internship in the Department of Psychiatry, Louisiana State University Medical School and at the New Orleans Child Guidance Center. During most of his graduate training he was employed by the Louisiana State Department of Hospitals, serving at several mental health clinics, before receiving the Master of Arts degree at Louisiana State University in 1965.

In 1966 he accepted a position as research associate in the School of Social Welfare, Louisiana State University, to direct a three-year research program on the psychosocial problems in the rehabilitation of leprosy patients which was funded by the U. S. Department of Health, Education, and Welfare through the Vocational Rehabilitation program. Upon completion of this project, and the authorship of the final report, he entered the full time private practice of clinical psychology in Baton Rouge, having previously received the license to independent practice

from the state board of examiners of professional psychology in 1966. He is so engaged at the present time.

Richard Rolston is married to the former Marcella Ann Van Oss and resides in Baton Rouge, Louisiana.

EXAMINATION AND THESIS REPORT

Candidate: Richard Hummel Rolston

Major Field. Psychology

Title of Thesis: The effect of prior physical abuse on the expression of overt and fantasy aggressive behavior in children.

Approved:

Joseph G. Tannyson
Major Professor and Chairman

Max Goodrich
Dean of the Graduate School

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Date of Examination:

16 April 1971